DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS RESIDENTIAL AND OUTPATIENT PROGRAMS COMPLIANCE BRANCH STATUS REPORT

This is an alphabetical list by county of all non-medical alcoholism and drug abuse recovery or treatment facilities licensed and/or certified by the Department of Alcohol and Drug Programs.

To view facilities within a specific county, simply click on the county name below. For easier browsing and navigation through this report, please access the <u>"Page and Bookmark"</u> View option on your Adobe Reader.

Alameda County	Madera County	San Joaquin County
Alpine County	Marin County	San Luis Obispo County
Amador County	Mariposa County	San Mateo County
Butte County	Mendocino County	Santa Barbara County
Calaveras County	Merced County	Santa Clara County
Colusa County	Modoc County	Santa Cruz County
Contra Costa County	Mono County	Shasta County
Del Norte County	Monterey County	Sierra County
El Dorado County	Napa County	Siskiyou County
Fresno County	Nevada County	Solano County
Glenn County	Orange County	Sonoma County
Humboldt County	Placer County	Stanislaus County
Imperial County	Plumas County	Sutter County
Inyo County	Riverside County	Tehama County
Kern County	Sacramento County	Trinity County
Kings County	San Benito County	Tulare County
Lake County	San Bernardino County	Tuolumne County
Lassen County	San Diego County	Ventura County
Los Angeles County	San Francisco County	Yolo County
		Yuba County

COMMENTS?

We are always looking for ways to improve this document. If you have any comments or suggestions, please e-mail them to hyanez@adp.state.ca.us. If you wish to receive a reply be sure to include your e-mail address in the body of the message.

LEGEND

CALIFORNIA DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS LICENSED RESIDENTIAL FACILITIES AND/OR CERTIFIED ALCOHOL AND DRUG PROGRAMS

Program Name: The facility/program name.

Legal Name: The legal name of the entity having the authority and responsibility for the

operation of the facility or program.

Address: The facility/program address. The location where services are provided.

City/State: Name of the city where the facility/program is located.

Record ID: The identification number issued by the Department of Alcohol and Drug Programs

(ADP), Residential and Outpatient Programs Compliance Branch (ROPCB), for licensed facilities or certified programs. The last digit tells if the facility/program is

a nonprofit (N) or profit (P) entity.

Service Type: Indicates if the facility/program is:

o RES - Indicates facility licensed by the Department of Alcohol and Drug Programs (ADP), the licensing authority for 24-hour residential nonmedical alcoholism or drug abuse recovery or treatment facilities serving adults.

- o NON Indicates a nonresidential program which has voluntarily applied to ADP for alcohol and/or drug certification.
- o DETOX Indicates a free standing, 24-hour nonmedical detoxification facility licensed by ADP.
- o RES-DETOX Indicates a facility licensed by ADP to provide 24-hour residential nonmedical alcohol and/or drug recovery, treatment, and detoxification services for adults.
- O DHS Indicates licensure by the Department of Health Services, the licensing authority for medical alcohol and drug recovery or treatment facilities whose programs are certified by ADP. Typically, these are Chemical Dependency Recovery Hospitals.
- O DSS Indicates licensure by the Department of Social Services, the licensing authority for residential facilities for individuals in need of care and supervision whose programs are certified by ADP. Typically, these are group homes.
- o COR Indicates the facility is under the jurisdiction of the Department of Corrections (locked facility) whose program is certified by ADP.

Resident Capacity: Indicates the maximum number of residents authorized by ADP to receive

recovery, treatment, or detoxification services at any one time in the residential

facility.

Total Occupancy: Designates the maximum number of residential facility participants plus any

dependent children, staff, or volunteers who may be housed in the facility. This

occupancy is approved by the State or local fire authority.

(The resident capacity and total occupancy are only indicated for licensed <u>residential</u> facilities. Certified nonresidential facilities show "0" as the resident capacity and total occupancy.)

As of: 04/06/2005 Alameda County

Program Name: ALLIED RE-ENTRY PROGRAM
Legal Name: ALLIED FELLOWSHIP SERVICE
Address: 1524 29TH AVENUE
City, State: OAKLAND, CA 94601
Record ID: 010036BN
Service Type: RES
Resident Capacity: 37
Total Occupancy: 43

Phone #: (510)535-1236

Program Name: ALLIED RE-ENTRY PROGRAM
Legal Name: ALLIED FELLOWSHIP SERVICE
Address: 1524 29TH AVENUE
City, State: OAKLAND, CA 94601Record ID: 010036CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)534-5354

Program Name: ORCHID WOMEN'S RECOVERY CENTER Record ID: 010006AN Legal Name: BI-BETT Service Type: RES

Address: 1342 EAST 27TH STREET Resident Capacity: 12

City, State: OAKLAND, CA 94606 Total Occupancy: 12

Phone #: (510)535-0611

Program Name: EAST OAKLAND RECOVERY CENTER Record ID: 010006DN Legal Name: BI-BETT Service Type: NON
Address: 10700 MACARTHUR BOULEVARD, SUITE 12 Resident Capacity: 0
City, State: OAKLAND, CA 94605- Total Occupancy: 0

Phone #: (510)568-2432

Program Name: ORCHID WOMEN'S RECOVERY CENTER
Legal Name: BI-BETT
Address: 1392 EAST 27TH STREET
City, State: OAKLAND, CA 94606Record ID: 010006CN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (510)535-0611

Program Name: C.U.R.A., INC.

Legal Name: CARNALES UNIDOS REFORMANDO ADICTOS INCORPORATE

Address: 37437 GLENMOOR DRIVE

City, State: FREMONT, CA 94536

Record ID: 010010AN
Service Type: RES

Resident Capacity: 51

Total Occupancy: 51

Phone #: (510)713-3200

Program Name: C.U.R.A., INC. Record ID: 010010CN

Legal Name: CARNALES UNIDOS REFORMANDO ADICTOS INCORPORATED (C.U.F. Service Type: RES Address: 531 24TH STREET Resident Capacity: 48
City, State: OAKLAND, CA 94612- Total Occupancy: 48

Phone #: (510)839-2525

Program Name:XANTHOS, INC.Record ID:010033ANLegal Name:CHANGE THRU XANTHOS, INC.Service Type:NONAddress:2325 CLEMENT AVENUEResident Capacity:0City, State:ALAMEDA, CA 94501Total Occupancy:0

Phone #: (510)522-8363

As of: 04/06/2005 Alameda County

Program Name: PHASE III MEN'S RECOVERY FACILITY
Legal Name: CHRISTIAN SERVICES
Address: 1014 21ST STREET
Resident Capacity: 6

Total Occupancy: 6

Phone #: (510)763-5713

City, State: OAKLAND, CA 94607-

Program Name: EAST BAY COMMUNITY RECOVERY PROJECT
Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT
Address: 22971 SUT22971 SUTRO STREET, SUITE A
City, State: HAYWARD, CA 94541
Record ID: 010025DN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)728-8600

Program Name: PROJECT PRIDE RESIDENTIAL PROGRAM FOR WOMEN & CHILDREN Record ID: 010025BN

Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT

Address: 2551 SAN PABLO AVENUE

City, State: OAKLAND, CA 94612
Total Occupancy: 119

Phone #: (510)446-7150

Program Name: EAST BAY COMMUNITY RECOVERY PROJECT - NONRESIDENTIAL
Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT
Address: 2551 AND 2577 SAN PABLO AVENUE
City, State: OAKLAND, CA 94612
Record ID: 010025CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)446-7180

Program Name: UJIMA HOUSE, A DIVISION OF THE HAIGHT ASHBURY FREE CLINICS Record ID: 010065AN

Legal Name:HAIGHT ASHBURY FREE CLINICS, INC.Service Type:NONAddress:9925 INTERNATIONAL BOULEVARD, SUITE 9Resident Capacity:0City, State:OAKLAND, CA 94603-Total Occupancy:0

Phone #: (510)569-8933

Program Name: JOHN GEORGE FAMILY CENTER
Legal Name: HEALTHY BABIES PROJECT, INC.
Address: 3229 ELM STREET
City, State: OAKLAND, CA 94609
Record ID: 010017CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)450-0881

Program Name: THE HARRIET TUBMAN RECOVERY CENTER Record ID: 010017DN

Legal Name:HEALTHY BABIES PROJECT, INC.Service Type:RESAddress:1004 36TH STREETResident Capacity:6City, State:OAKLAND, CA 94608-Total Occupancy:6

Phone #: (510)547-9740

Program Name: HARRIET TUBMAN RECOVERY CENTER NO. 2 Record ID: 010017EN

Legal Name:HEALTHY BABIES PROJECT, INC.Service Type:RESAddress:3328 ELM STREETResident Capacity:8City, State:OAKLAND, CA 94609Total Occupancy:13

Phone #: (510)428-9530

As of: 04/06/2005 Alameda County

Program Name: MAUDELL SHIREK RECOVERY VILLAGE
Legal Name: HEALTHY BABIES PROJECT, INC.
Address: 471 34TH STREET
City, State: OAKLAND, CA 94609
Record ID: 010017FN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)450-0881

Program Name: NEW HEIGHTS CHRISTIAN CENTER
Legal Name: HOREB HOUSE
Address: 1251 98TH AVENUE
City, State: OAKLAND, CA 94603-2406
Record ID: 010077AN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (510)382-1060

Program Name: NEW HEIGHTS CHRISTIAN CENTER
Legal Name: HOREB HOUSE
Address: 1255 98TH AVENUE
City, State: OAKLAND, CA 94603Record ID: 010077BN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (510)382-1060

Program Name: PROJECT EDEN, A PROGRAM OF HORIZON SERVICES, INC
Legal Name: HORIZON SERVICES, INC.
Address: 22646 SECOND STREET
City, State: HAYWARD, CA 94541Record ID: 010001CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)247-8200

Program Name: CHRYSALIS
Legal Name: HORIZON SERVICES, INCORPORATED
Address: 3839, 3841, AND 3845 TELEGRAPH AVENUE
City, State: OAKLAND, CA 94609Record ID: 010001AN
Service Type: RES
Resident Capacity: 27
Total Occupancy: 28

Phone #: (510)655-7792

Program Name: CRONIN HOUSE Record ID: 010001BN Legal Name: HORIZON SERVICES, INCORPORATED Service Type: RES

Address: 2595 DEPOT ROAD Resident Capacity: 40

City, State: HAYWARD, CA 94545 Total Occupancy: 44

Phone #: (510)784-5874

Program Name: MISSIONARY RECOVERY CENTER Record ID: 010076AN Legal Name: JUBILEE RESTORATION INCORPORATED Service Type: RES

Address: 871-875 27TH STREET Resident Capacity: 12
City, State: OAKLAND, CA 94607-3451 Total Occupancy: 12

Phone #: (510)836-2629

Program Name: SI SE PUEDE Record ID: 010002DN

Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE OF ALAMED Service Type: NON Address: 1315 FRUITVALE AVENUE Resident Capacity: 0
City, State: OAKLAND, CA 94601- Total Occupancy: 0

Phone #: (510)536-4760

As of: 04/06/2005 Alameda County

Program Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE OF ALAMED Record ID: 010002AN Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE OF ALAMED Service Type: RES

Address: 425 VERNON STREET Resident Capacity: 20
City, State: OAKLAND, CA 94610 Total Occupancy: 20

Phone #: (510)419-1040

Program Name: MUJERES CON ESPERANZA/WOMEN'S SERVICES ENHANCEMENT PR
Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE OF ALAMED
Service Type: NON

Address: 3315 INTERNATIONAL BOULEVARD Resident Capacity: 0
City, State: OAKLAND, CA 94601- Total Occupancy: 0

Phone #: (510)536-4764

Program Name: MAGNOLIA WOMEN'S RECOVERY PROGRAM Record ID: 010081AN Legal Name: MAGNOLIA WOMEN'S RECOVERY PROGRAM, INC. Service Type: RES

Address: 36928 MAGNOLIA STREET Resident Capacity: 6

City, State: NEWARK, CA 94560- Total Occupancy: 12

Phone #: (510)713-7743

Program Name: INTEGRATED COUNSELING AND CONSULTING SERVICES
Legal Name: MERCHANT, DONALD L. AND MARTINEZ, DAMIAN J.

Address: 22612 FOOTHILL BOULEVARD, SUITE 230
City, State: HAYWARD, CA 94541
Record ID: 010064AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)885-0607

Program Name: OPTIONS RECOVERY SERVICES
Legal Name: OPTIONS RECOVERY SERVICES
Address: 1931 CENTER STREET
City, State: BERKELEY, CA 94704
Record ID: 010066AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)666-9552

Program Name:PRAISE FELLOWSHIP MEN'S RECOVERY FACILITYRecord ID:010078ANLegal Name:PRAISE FELLOWSHIP MINISTRIES, INC.Service Type:RESAddress:6423 BANCROFT AVENUE, UNITS A AND BResident Capacity:16

Total Occupancy: 16

City, State: OAKLAND, CA 94605-

Phone #: (510)569-2906

Program Name: R-QUEST Record ID: 010082AP
Legal Name: R-QUEST Service Type: NON

Address: 40 CALIFORNIA AVENUE, SUITE B

City, State: PLEASANTON, CA 94566
Total Occupancy: 0

Phone #: (925)426-0501

Program Name: WOMEN'S EMPOWERMENT NETWORK Record ID: 010029CN

Legal Name:R.L. GEDDINS WOMEN'S EMPOWERMENT NETWORKService Type:RESAddress:5806 AND 5808 WALNUT STREETResident Capacity:6City, State:OAKLAND, CA 94605-Total Occupancy:8

Phone #: (510)729-6730

As of: 04/06/2005 Alameda County

Program Name: SECOND CHANCE CABRILLO CENTER
Legal Name: SECOND CHANCE, INC.
Address: 4673-P THORNTON AVENUE
City, State: FREMONT, CA 94536Record ID: 010061EN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)792-4357

Program Name: SECOND CHANCE ASHLAND CENTER Record ID: 010061BN Legal Name: SECOND CHANCE, INC. Service Type: NON

Address: 1403 164TH AVENUE Resident Capacity: 0

City, State: SAN LEANDRO, CA 94578
Total Occupancy: 0

Phone #: (510)481-8645

Program Name: SECOND CHANCE PHOENIX PROGRAM Record ID: 010061DN

Legal Name:SECOND CHANCE, INC.Service Type:NONAddress:37957 FREMONT BOULEVARDResident Capacity:0City, State:FREMONT, CA 94536-Total Occupancy:0

Phone #: (510)792-4357

Program Name: SECOND CHANCE HAYWARD RECOVERY CENTER Record ID: 010061CN

Legal Name:SECOND CHANCE, INC.Service Type:NONAddress:1826 B STREETResident Capacity:0City, State:HAYWARD, CA 94541-Total Occupancy:0

Phone #: (510)886-8696

Program Name: SECOND CHANCE, (TRI-CITIES) INC. Record ID: 010061AN

Legal Name:SECOND CHANCE, INC.Service Type:NONAddress:6330 THORNTON AVENUEResident Capacity:0City, State:NEWARK, CA 94560-Total Occupancy:0

Phone #: (510)792-4357

Program Name: FREEDOM HOUSE Record ID: 010041AN

Legal Name: SEVENTH STEP FOUNDATION, INC.

Address: 475 MEDFORD AVENUE

City, State: HAYWARD, CA 94541
Service Type: RES

Resident Capacity: 24

Total Occupancy: 24

Phone #: (510)278-0230

Program Name:TERRA FIRMA DIVERSION/EDUCATIONAL SERVICESRecord ID:010079APLegal Name:TERRA FIRMA DIVERSION EDUCATIONAL SERVICESService Type:NONAddress:30030 MISSION BOULEVARD, SUITE 112Resident Capacity:0

City, State: HAYWARD, CA 94544Phone #: (510)675-9362

Total Occupancy: 0

Program Name: FRIENDSHIP HOUSE AMERICAN INDIAN LODGE Record ID: 010062AN

Legal Name: THE FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS
Address: 1818 38TH AVENUE AND 1815 39TH AVENUE
City, State: OAKLAND, CA 94601Total Occupancy: 17

Phone #: (510)535-7100

As of: 04/06/2005 Alameda County

Program Name: THE HOME OF COMFORT Record ID: 010069CN Legal Name: THE HOME OF COMFORT Service Type: RES

Address: 3038, 3040, 3042, AND 3044 MARTIN LUTHER KING, JR. WAY Resident Capacity: 16

Total Occupancy: 24

City, State: OAKLAND, CA 94609-

Phone #: (510)923-1388

Program Name: NEW BRIDGE FOUNDATION Record ID: 010013DN Legal Name: THE NEW BRIDGE FOUNDATION, INC. Service Type: NON Address: 1398 SOLANO AVENUE Resident Capacity: 0

City, State: ALBANY, CA 94706
Resident Capacity: 0

Total Occupancy: 0

Phone #: (510)526-6200

Program Name: NEW BRIDGE FOUNDATION Record ID: 010013AN
Legal Name: THE NEW BRIDGE FOUNDATION, INC.
Service Type: RES-DETOX

Address: 1816 AND 1820 SCENIC AVENUE Resident Capacity: 93
City, State: BERKELEY, CA 94709 Total Occupancy: 93

Phone #: (510)548-7270

Program Name: NEW BRIDGE FOUNDATION Record ID: 010013BN Legal Name: THE NEW BRIDGE FOUNDATION, INC. Service Type: NON

Address: 1816 AND 1820 SCENIC AVENUE Resident Capacity: 0
City, State: BERKELEY, CA 94709- Total Occupancy: 0

Phone #: (510)548-7270

Program Name: NEW BRIDGE FOUNDATION Record ID: 010013CN

Legal Name: THE NEW BRIDGE FOUNDATION, INC.Service Type: NONAddress: 368 12TH STREETResident Capacity: 0City, State: OAKLAND, CA 94607-Total Occupancy: 0

Phone #: (510)451-9675

Program Name: MANDELA II Record ID: 010011DN

Legal Name:THE SOLID FOUNDATIONService Type:RESAddress:3408 ANDOVER STREETResident Capacity:14City, State:OAKLAND, CA 94609Total Occupancy:24

Phone #: (510)428-0457

Program Name: MANDELA HOUSE I Record ID: 010011EN
Legal Name: THE SOLID FOUNDATION Service Type: RES
Address: 6939 MACARTHUR BOULEVARD
City, State: OAKLAND, CA 94605-2532 Resident Capacity: 6
Total Occupancy: 12

Phone #: (510)553-9973

Program Name: KELLER HOUSE Record ID: 010011CN

Legal Name:THE SOLID FOUNDATIONService Type:RESAddress:353 ATHOL AVENUEResident Capacity:8City, State:OAKLAND, CA 94606Total Occupancy:16

Phone #: (510)251-2001

As of: 04/06/2005 Alameda County

Program Name: THE SOLID FOUNDATION WOMEN'S CENTER Record ID: 010011FN
Legal Name: THE SOLID FOUNDATION Service Type: NON

Address: 4778 INTERNATIONAL BOULEVARD Resident Capacity: 0
City, State: OAKLAND, CA 94601-5210 Total Occupancy: 0

Phone #: (510)533-5317

Program Name: ALAMEDA HOUSE Record ID: 010019AN

Legal Name: THE SOLIDARITY FELLOWSHIP, INC.

Address: 34401 AND 34413 BLACKSTONE WAY

City, State: FREMONT, CA 94555

Total Occupancy: 12

Phone #: (510)796-7120

Program Name: CROSSROADS Record ID: 010019BN

Legal Name: THE SOLIDARITY FELLOWSHIP, INC.

Address: 823 OLAVINA STREET

City, State: LIVERMORE, CA 94550-2618

Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (925)371-0992

Program Name: COMMUNITY RECOVERY CENTER Record ID: 010005FN
Legal Name: THE WEST OAKLAND HEALTH COUNCIL Service Type: NON

Address: 9006 MAC ARTHUR BOULEVARD Resident Capacity: 0
City, State: OAKLAND, CA 94605 Total Occupancy: 0

Phone #: (510)430-1771

Program Name: WEST OAKLAND OUTPATIENT SUBSTANCE ABUSE SERVICES Record ID: 010005HN

Legal Name: THE WEST OAKLAND HEALTH COUNCIL

Address: 3007 TELEGRAPH AVENUE

City, State: OAKLAND, CA 94609
Total Occupancy: 0

Phone #: (510)433-1500

Program Name: WEST OAKLAND HEALTH COUNCIL TRANSITIONAL HOUSING Record ID: 010005IN

Legal Name:THE WEST OAKLAND HEALTH COUNCILService Type:RESAddress:450 27TH STREETResident Capacity:23City, State:OAKLAND, CA 94609-Total Occupancy:23

Phone #: (510)268-8305

Program Name: NATIVE AMERICAN HEALTH CENTER
Legal Name: URBAN INDIAN HEALTH BOARD, INC.
Address: 3124 INTERNATIONAL BOULEVARD
City, State: OAKLAND, CA 94601Record ID: 010083AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (510)535-4440

Program Name: VALLEY COMMUNITY HEALTH CENTER Record ID: 010046BN Legal Name: VALLEY COMMUNITY HEALTH CENTER, INC. Service Type: NON

Address: 4341 RAILROAD AVENUE

City, State: PLEASANTON, CA 94566
Total Occupancy: 0

Phone #: (925)201-5544

Total Occupancy: 5

As of: 04/06/2005 Alameda County

Program Name: WISTAR R AND R PROGRAM, INC.

Legal Name: WISTAR R AND R PROGRAM, INC.

Address: 9735 EMPIRE ROAD

Resident Capacity: 5

Phone #: (510)568-9288

City, State: OAKLAND, CA 94603-

Program Name: WISTAR WOMEN'S R AND R PROGRAM
Legal Name: WISTAR R AND R PROGRAM, INC.

Record ID: 010032BN
Service Type: RES

Address: 273 TUNIS ROAD Resident Capacity: 6
City, State: OAKLAND, CA 94603- Total Occupancy: 6

Phone #: (510)638-4470

Program Name: WOMEN ON THE WAY RECOVERY CENTER

Legal Name: WOMEN ON THE WAY RECOVERY CENTER

Record ID: 010072AN

Service Type: RES

Address: 20424 HAVILAND AVENUE Resident Capacity: 10 City, State: HAYWARD, CA 94541- Total Occupancy: 10

Phone #: (510)276-3661

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California Department of Alcohol and Drug Programs Licensed Residential Facilities and/or Certified Alcohol and Drug Programs As of: 04/06/2005 Amador County

Program Name: AMADOR COUNTY ALCOHOL AND DRUG SERVICES

Legal Name: AMADOR COUNTY

Address: 1001 BROADWAY, SUITES 106 AND 204

City, State: JACKSON, CA 95642-

Phone #: (209)223-6556

Record ID: 030001AN

Service Type: NON Resident Capacity: 0

Total Occupancy: 0

As of: 04/06/2005 **Butte County**

Program Name: TRI COUNTY TREATMENT RESIDENTIAL PROGRAM FOR WOMEN

Legal Name: BARBARA TORRI

Service Type: RES

Address: 2472 ORO QUINCY HIGHWAY Resident Capacity: 12 City, State: OROVILLE, CA 95966- Total Occupancy: 12

Phone #: (530)533-5272

Program Name: TRI-COUNTY TREATMENT OUTPATIENT Record ID: 040014BP
Legal Name: BARBARA TORRI Service Type: NON
Address: 3014 OLIVE HIGHWAY, SUITE C
City, State: OROVILLE, CA 95966- Total Occupancy: 0

Phone #: (530)533-5272

Program Name: BUTTE COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - TREATM

Legal Name: BUTTE COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Record ID: 040016BN

Service Type: NON

Address: 564 RIO LINDO AVENUE, SUITE 204

City, State: CHICO, CA 95926
Total Occupancy: 0

Phone #: (530)895-6534

Program Name: BUTTE COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - ACCESS Record ID: 040016AN

Legal Name: BUTTE COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - ACCESS Service Type: NON Address: 592 RIO LINDO Resident Capacity: 0
City, State: CHICO, CA 95926- Total Occupancy: 0

Phone #: (530)891-2999

Program Name: CHEROKEE HOUSE Record ID: 040007AN

Legal Name:CHEROKEE RESTORATION FELLOWSHIPService Type:RESAddress:186 CRYSTAL PINES ROADResident Capacity:6City, State:OROVILLE, CA 95965-Total Occupancy:6

Phone #: (530)534-8663

Program Name: CHEROKEE HOUSE Record ID: 040007BN

Legal Name: CHEROKEE RESTORATION FELLOWSHIP

Address: 36 CRYSTAL PINES ROAD

City, State: OROVILLE, CA 95965
Total Occupancy: 6

Phone #: (530)534-3663

Program Name: CHEROKEE OUTPATIENT PROGRAM

Legal Name: CHEROKEE RESTORATION FELLOWSHIP

Record ID: 040007CN

Service Type: NON

Legal Name: CHEROKEE RESTORATION FELLOWSHIP

Address: 1341 LINCOLN

City, State: OROVILLE, CA 95965
Total Occupancy: 0

Phone #: (530)533-5429

Program Name: CHICO RECOVERY CENTER Record ID: 040021AN
Legal Name: CHICO RECOVERY CENTER Service Type: NON

Address: 2057 FOREST AVENUE, SUITE 5 Resident Capacity: 0
City, State: CHICO, CA 95928- Total Occupancy: 0

Phone #: (530)343-6566

As of: 04/06/2005 **Butte County**

Program Name: ESPLANADE HOUSE OUTPATIENT ALCOHOL AND DRUG PROGRAM
Legal Name: COMMUNITY ACTION AGENCY OF BUTTE COUNTY, INC.

Address: 181 EAST SHASTA AVENUE
Resident Capacity: 0

Address: 181 EAST SHASTA AVENUE Resident Capacity: 0
City, State: CHICO, CA 95973- Total Occupancy: 0

Phone #: (530)891-2977

Program Name:FEATHER RIVER TRIBAL HEALTH, INC.Record ID:040020ANLegal Name:FEATHER RIVER TRIBAL HEALTH, INC.Service Type:NONAddress:2145 5TH AVENUEResident Capacity:0

City, State: OROVILLE, CA 95965Total Occupancy: 0

Phone #: (530)534-5394

Program Name: FREEDOM RECOVERY EDUCATION PROGRAM
Legal Name: NORTH VALLEY PARENT EDUCATION NETWORK
Address: 2070 & 2080 TALBERT DRIVE
Resident Capacity: 0

City, State: CHICO, CA 95928- Total Occupancy: 0

Phone #: (530)893-0391

Program Name: FREEDOM INC. DAY TREATMENT PROGRAM
Legal Name: NORTH VALLEY PARENT EDUCATION NETWORK
Address: 1462 MYERS STREET, SUITE B
Record ID: 040010AN
Service Type: NON
Resident Capacity: 0

City, State: OROVILLE, CA 95965Total Occupancy: 0

Phone #: (530)534-9958

Program Name: NORTHERN VALLEY INDIAN HEALTH, INC
Legal Name: NORTHERN VALLEY INDIAN HEALTH, INC.
Address: 845 WEST EAST AVENUE
City, State: CHICO, CA 95926Record ID: 040018AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

City, State: CHICO, CA 95926-Phone #: (530)896-9400

Program Name: SKYWAY HOUSE MEN'S RESIDENTIAL II Record ID: 040006HN

Legal Name: SKYWAY HOUSE Service Type: RES
Address: 7357 SKYWAY
City, State: PARADISE, CA 95969- Total Occupancy: 6

Phone #: (530)876-9436

Program Name: SKYWAY HOUSE Record ID: 040006EN Legal Name: SKYWAY HOUSE Service Type: RES
Address: 6363 OAK WAY Resident Capacity: 6
City, State: PARADISE, CA 95967- Total Occupancy: 6

Phone #: (530)876-9436

Program Name: SKYWAY HOUSE MEN'S RESIDENTIAL II Record ID: 040006JN

Legal Name: SKYWAY HOUSE Service Type: RES
Address: 7357 B SKYWAY
City, State: PARADISE, CA 95969- Total Occupancy: 6

Phone #: (530)876-9436

As of: 04/06/2005 **Butte County**

Program Name:SKYWAY HOUSE MEN'S RESIDENTIAL IIRecord ID: 040006INLegal Name:SKYWAY HOUSEService Type: RESAddress:7387 SKYWAYResident Capacity: 4

Total Occupancy: 4

City, State: PARADISE, CA 95969-

Phone #: (530)876-9436

Program Name: SKYWAY HOUSE Record ID: 040006DN Legal Name: SKYWAY HOUSE Service Type: NON

Address: 564 RIO LINDO AVENUE, SUITES 102 & 103 Resident Capacity: 0

City, State: CHICO, CA 95926- Total Occupancy: 0

Phone #: (530)876-9436

Program Name: SKYWAY HOUSE T.R.A.C.K. TEACHING RECOVERY AND CARE FOR k Record ID: 040006GN

Legal Name:SKYWAY HOUSEService Type:RESAddress:5075 LINCOLN BOULEVARDResident Capacity:13City, State:OROVILLE, CA 95966-Total Occupancy:26

Phone #: (530)876-9436

Program Name: SKYWAY HOUSE Record ID: 040006CN Legal Name: SKYWAY HOUSE Service Type: RES

Address: 4133 HIGHWAY 32 Resident Capacity: 26

City, State: CHICO, CA 95973-8705 Total Occupancy: 26

Phone #: (530)893-3698

Program Name: SKYWAY HOUSE Record ID: 040006BN Legal Name: SKYWAY HOUSE Service Type: RES

Address: 6373 OAK WAY Resident Capacity: 14

City, State: PARADISE, CA 95969- Total Occupancy: 14

Phone #: (530)876-9436

Program Name: TRI-COUNTY TREATMENT Record ID: 040014AP
Legal Name: TORRI, BARBARA Service Type: RES-DETOX

Address: 2740 ORO DAM BOULEVARD Resident Capacity: 48
City, State: OROVILLE, CA 95966- Total Occupancy: 60

Phone #: (530)533-5272

As of: 04/06/2005 *Calaveras County*

Program Name: CALAVERAS COUNTY BEHAVIORAL HEALTH SERVICES SUBSTANCI
Legal Name: CALAVERAS COUNTY

Address: 891 MOUNTAIN RANCH ROAD

Record ID: 050003AN
Service Type: NON

Recident Capacity: 0

Address: 891 MOUNTAIN RANCH ROAD Resident Capacity: 0
City, State: SAN ANDREAS, CA 95249- Total Occupancy: 0

Phone #: (209)754-6555

Program Name: CHANGING ECHOES Record ID: 050002AN
Legal Name: CHANGING ECHOES, INC. Service Type: RES-DETOX

Address: 7632 POOL STATION ROAD

City, State: ANGELS CAMP, CA 95222

Resident Capacity: 32

Total Occupancy: 32

Phone #: (209)785-3666

As of: 04/06/2005 Colusa County

Program Name: COUNTY OF COLUSA DEPARTMENT OF SUBSTANCE ABUSE SERVICI Record ID: 060001FN Legal Name: COUNTY OF COLUSA DEPARTMENT OF SUBSTANCE ABUSE SERVICI Service Type: NON

Address: 162 EAST CARSON STREET, SUITE B Resident Capacity: 0 City, State: COLUSA, CA 95932- Total Occupancy: 0

Phone #: (530)458-0516

Record ID: 070001GN

Service Type: RES

As of: 04/06/2005 Contra Costa County

Program Name: DIABLO VALLEY RANCH ANNEX III

Legal Name: BI-BETT
Address: 1820 BELMONT ROAD

Address: 1820 BELMONT ROAD Resident Capacity: 4
City, State: CONCORD, CA 94520 Total Occupancy: 4

Phone #: (925)682-9765

Program Name: FREDERIC OZANAM CENTER--VALERIE'S PLACE Record ID: 070001HN

Legal Name: BI-BETT Service Type: RES

Address: 2980 CRAWFORD STREET Resident Capacity: 5
City, State: CONCORD, CA 94518 Total Occupancy: 5

Phone #: (925)676-4840

Program Name: OAKNOLLS Record ID: 070001JN

Legal Name:BI-BETTService Type:RESAddress:11460 MARSH CREEK ROADResident Capacity:5City, State:CLAYTON, CA 94517Total Occupancy:5

Phone #: (925)672-5700

Program Name: FREDERIC OZANAM CENTER--RAINBOW VILLAGE Record ID: 070001LN

Legal Name: BI-BETT Service Type: RES

Address: 2980 MT DIABLO BOULEVARD Resident Capacity: 4
City, State: CONCORD, CA 94518 Total Occupancy: 4

Phone #: (925)676-4840

Program Name: FREDERIC OZANAM CENTER--AUNTIE EM'S Record ID: 070001QN

Legal Name: BI-BETT Service Type: RES
Address: 2830 PROSPECT STREET Resident Capacity: 6

Address: 2830 PROSPECT STREET Resident Capacity: 6
City, State: CONCORD, CA 94518 Total Occupancy: 6

Phone #: (925)676-4840

Program Name: EAST COUNTY WOLLAM HOUSE - PERINATAL Record ID: 070001SN

Legal Name: BI-BETT Service Type: RES

Address: 510 WOLLAM AVENUE Resident Capacity: 6
City, State: BAY POINT, CA 94565 Total Occupancy: 12

Phone #: (925)458-1978

Program Name: SHENNUM CENTER Record ID: 070001CN

Legal Name: BI-BETT Service Type: RES-DETOX

Address: 2090 COMMERCE AVENUE Resident Capacity: 20 City, State: CONCORD, CA 94520 Total Occupancy: 20

Phone #: (925)676-2580

Program Name: FREDERIC OZANAM CENTER Record ID: 070001BN

Legal Name:BI-BETTService Type:RESAddress:2931 PROSPECT AVENUEResident Capacity:5City, State:CONCORD, CA 94518Total Occupancy:6

Phone #: (925)676-4840

As of: 04/06/2005 Contra Costa County

Program Name: DIABLO VALLEY RANCH
Legal Name: BI-BETT

Record ID: 070001AN
Service Type: RES

Address: 11540 MARSH CREEK ROAD Resident Capacity: 54
City, State: CLAYTON, CA 94517 Total Occupancy: 56

Phone #: (925)672-5700

Program Name: DIABLO VALLEY RANCH ANNEX II Record ID: 070001FN

Legal Name: BI-BETT Service Type: RES

Address: 1840 BELMONT ROAD Resident Capacity: 4
City, State: CONCORD, CA 94520 Total Occupancy: 4

Phone #: (925)682-9765

Program Name: DIABLO VALLEY RANCH ANNEX I Record ID: 070001EN

Legal Name: BI-BETT Service Type: RES

Address: 1860 BELMONT ROAD Resident Capacity: 4
City, State: CONCORD, CA 94520 Total Occupancy: 4

Phone #: (925)682-9765

Program Name: SERENITY HOUSE Record ID: 070001DN

Legal Name: BI-BETT Service Type: RES
Address: 11440 MARSH CREEK ROAD
City, State: CLAYTON, CA 94517 Total Occupancy: 6

Phone #: (925)672-5700

Program Name: EAST COUNTY WOLLAM PERINATAL AND RESIDENTIAL Record ID: 070001VN

Legal Name: BI-BETT Service Type: RES

Address: 498 WOLLAM AVENUE, UNIT 5 Resident Capacity: 4
City, State: BAY POINT, CA 94565-4318 Total Occupancy: 4

Phone #: (925)458-1978

Program Name: EAST COUNTY GAADDS Record ID: 070001UN

Legal Name: BI-BETT Service Type: NON

Address: 500 SCHOOL STREET Resident Capacity: 0
City, State: PITTSBURG, CA 94565 Total Occupancy: 0

Phone #: (925)439-1318

Program Name: EAST COUNTY WOLLAM HOUSE-RESIDENTIAL Record ID: 070001TN

Legal Name: BI-BETT Service Type: RES
Address: 498 WOLLAM AVENUE, SUITES 2 AND 4
City, State: BAY POINT, CA 94565-4318 Total Occupancy: 6

Phone #: (925)458-1978

Program Name: GAADDS CENTRAL Record ID: 070001XN

Legal Name: BI-BETT Service Type: NON
Address: 2090 COMMERCE AVENUE Resident Capacity: 0

City State: CONCORD CA 04500

City, State: CONCORD, CA 94520- Total Occupancy: 0

Phone #: (925)685-7418

Record ID: 070001YN

Record ID: 070001RN

Service Type: RES-DETOX

Record ID: 070001NN

Record ID: 070001KN

Record ID: 070001ZN

Record ID: 070037AN

Record ID: 070012BN

Record ID: 070012EN

Service Type: RES

Service Type: RES

Service Type: RES

Service Type: NON

Service Type: RES

Resident Capacity: 4

Total Occupancy: 4

Resident Capacity: 14 Total Occupancy: 14

Resident Capacity: 5

Total Occupancy: 5

Resident Capacity: 4

Total Occupancy: 4

Resident Capacity: 4

Total Occupancy: 4

Resident Capacity: 0
Total Occupancy: 0

Total Occupancy: 0

As of: 04/06/2005 Contra Costa County

Program Name: EAST COUNTY WOLLAM PERINATAL

Legal Name: BI-BETT

Address: 498 WOLLAM AVENUE, UNIT 3 City, State: BAY POINT, CA 94565-4318

Phone #: (925)458-1978

Program Name: EAST COUNTY DETOXIFICATION CENTER

Legal Name: BI-BETT

Address: 500 SCHOOL STREET City, State: PITTSBURG, CA 94565

Phone #: (925)427-4217

Program Name: FREDERIC OZANAM CENTER--EMERALD CITY

Legal Name: BI-BETT

Address: 2950 PROSPECT STREET City, State: CONCORD, CA 94518

Phone #: (925)676-4840

Program Name: FREDERIC OZANAM CENTER - CRYSTAL PALACE

Legal Name: BI-BETT

Address: 1390 SANTA CLARA STREET City, State: CONCORD, CA 94518

Phone #: (925)676-4840

Program Name: EAST COUNTY WOLLAM PERINATAL

Legal Name: BI-BETT CORPORATION
Address: 498 WOLLAM AVENUE, UNIT 1
City, State: BAYPOINT, CA 94565-

Phone #: (925)458-1978

Program Name: CENTER POINT, INC.

Legal Name: CENTER POINT, INC.
Address: 820 23RD STREET, SUITE # A
City, State: RICHMOND, CA 94804-

Phone #: (510)412-0833

Program Name: DISCOVERY HOUSE

Legal Name: CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT

Address: 4645 PACHECO BOULEVARD

City, State: MARTINEZ, CA 94553

Service Type: RES

Resident Capacity: 40

Total Occupancy: 40

Phone #: (925)646-9270

Program Name: TRI-CITIES DISCOVERY CENTER

Legal Name: CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT

Address: 2586 APPIAN WAY

Service Type: NON
Resident Capacity: 0

City, State: PINOLE, CA 94564 Phone #: (510)374-7011

As of: 04/06/2005 Contra Costa County

Program Name: SOJOURNE COMMUNITY COUNSELING CENTER Record ID: 070012FN Legal Name: CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT Service Type: NON

Address: 3029 MACDONALD AVENUE Resident Capacity: 0
City, State: RICHMOND, CA 94804 Total Occupancy: 0

Phone #: (510)374-3815

Program Name: COLE HOUSE II Record ID: 070034BP

Legal Name: J. COLE RECOVERY HOMES, INC.

Address: 2435 PHILLIPS LANE
City, State: ANTIOCH, CA 94509Total Occupancy: 0

Phone #: (925)978-2973

Program Name: COLE HOUSE Record ID: 070034AP

Legal Name:J. COLE RECOVERY HOMES, INC.Service Type:RESAddress:1408 A STREETResident Capacity:11City, State:ANTIOCH, CA 94509-Total Occupancy:12

Phone #: (925)978-2873

Program Name: WEST COUNTY HUMAN DEVELOPMENT CENTER Record ID: 070004AN Legal Name: NEIGHBORHOOD HOUSE OF NORTH RICHMOND Service Type: RES

Address: 820 23RD STREET Resident Capacity: 64
City, State: RICHMOND, CA 94804 Total Occupancy: 120

Phone #: (510)233-1270

Program Name:NEW CONNECTIONSRecord ID:070015ANLegal Name:NEW CONNECTIONSService Type:NONAddress:1760 CLAYTON ROADResident Capacity:0

Total Occupancy: 0

Total Occupancy: 0

Phone #: (925)363-5000

City, State: CONCORD, CA 94520

Program Name: NEW CONNECTIONS Record ID: 070015EN Legal Name: NEW CONNECTIONS Service Type: NON Address: 3024 WILLOW PASS ROAD Resident Capacity: 0

Phone #: (925)363-5000

City, State: CONCORD, CA 94519-

Program Name: NEW CONNECTIONS Record ID: 070015CN Legal Name: NEW CONNECTIONS Service Type: NON
Address: 535 MARINA BOULEVARD Resident Capacity: 0
City, State: PITTSBURG, CA 94565 Total Occupancy: 0

Phone #: (925)363-5000

Program Name: NEW LEAF TREATMENT CENTER Record ID: 070035AP

Legal Name:NEW LEAF PARTNERSService Type:NONAddress:251 LAFAYETTE CIRCLE, SUITE 150Resident Capacity:0City, State:LAFAYETTE, CA 94549-Total Occupancy:0

Phone #: (925)284-5200

As of: 04/06/2005 Contra Costa County

Program Name: NEVIN HOUSE Record ID: 070036AN Legal Name: PHOENIX PROGRAMS, INC. Service Type: RES

Address: 3215/3221 NEVIN AVENUE Resident Capacity: 11

City, State: RICHMOND, CA 94808- Total Occupancy: 14

Phone #: (510)232-7633

Program Name:REACH PROJECTRecord ID:070024ANLegal Name:R.E.A.C.H. PROJECTService Type:NONAddress:1915 D STREETResident Capacity:0City, State:ANTIOCH, CA 94509Total Occupancy:0

Phone #: (925)754-3673

Program Name: CROSSROADS RECOVERY CENTER II Record ID: 070018KN Legal Name: RECOVERY MANAGEMENT SERVICES, INC. Service Type: RES

Address: 2480 PACHECO STREET Resident Capacity: 6
City, State: CONCORD, CA 94520- Total Occupancy: 7

Phone #: (925)682-5704

Program Name: CROSSROADS RECOVERY CENTER IV Record ID: 070018DN Legal Name: RECOVERY MANAGEMENT SERVICES, INC. Service Type: RES

Address: 2080 EAST STREET Resident Capacity: 9

City, State: CONCORD, CA 94520 Total Occupancy: 10

Phone #: (925)682-5704

Program Name:CROSSROADS TREATMENT CENTER IIRecord ID:070018INLegal Name:RECOVERY MANAGEMENT SERVICES, INC.Service Type:NONAddress:2025 PORT CHICAGO HIGHWAYResident Capacity:0City, State:CONCORD, CA 94520Total Occupancy:0

Phone #: (925)682-5704

Program Name: CROSSROADS TREATMENT CENTER I - OUTPATIENT DAY/EVE Record ID: 070018LN

Legal Name:RECOVERY MANAGEMENT SERVICES, INC.Service Type:NONAddress:2449 PACHECO STREETResident Capacity:0City, State:CONCORD, CA 94520-Total Occupancy:0

Phone #: (925)682-5704

Program Name: CROSSROADS TREATMENT CENTER I Record ID: 070018HN
Legal Name: RECOVERY MANAGEMENT SERVICES, INC. Service Type: RES-DETOX

Address: 2449 PACHECO STREET Resident Capacity: 15 City, State: CONCORD, CA 94520 Total Occupancy: 15

Phone #: (925)682-5704

Program Name:CROSSROADS RECOVERY CENTER IIIRecord ID:070018CNLegal Name:RECOVERY MANAGEMENT SERVICES, INC.Service Type:RESAddress:2118 EAST STREETResident Capacity:11City, State:CONCORD, CA 94520Total Occupancy:12

Phone #: (925)682-5704

As of: 04/06/2005

Address: 919 MELLUS STREET

City, State: MARTINEZ, CA 94533 Phone #: (925)229-4065

Contra Costa County

-	RUBICON SUBSTANCE ABUSE/DUAL DIAGNOSIS TREATMENT SI RUBICON PROGRAMS INCORPORATED	ERVI Record ID: Service Type:	
Address:	2500 BISSELL AVENUE	Resident Capacity:	0
City, State:	RICHMOND, CA 94804-	Total Occupancy:	
•	(510)235-1516	1 3	
Program Name:	ARCADIA PLACE	Record ID:	070006I N
	SUNRISE HOUSE	Service Type:	
•	2335 ARCADIA PLACE	Resident Capacity:	
	MARTINEZ, CA 94553	Total Occupancy:	
	(925)825-7049	Total Occupancy.	Ü
Dragram Nama	PINNACLE HOUSE	Record ID:	070006DN
_	SUNRISE HOUSE	Service Type:	
-	2359 PINNACLE DRIVE	Resident Capacity:	
	MARTINEZ, CA 94553	Total Occupancy:	
•	(925)825-7049	Total Occupancy.	o .
D 11			
	SUNRISE HOUSE	Record ID:	
	SUNRISE HOUSE	Service Type:	
	1575 MENDOCINO DRIVE	Resident Capacity:	
· ·	CONCORD, CA 94521-	Total Occupancy:	5
Phone #:	(925)825-7049		
-	SUNRISE HOUSE - NONRESIDENTIAL	Record ID:	
•	SUNRISE HOUSE	Service Type:	
	135 MASON CIRCLE, UNIT M	Resident Capacity:	
	CONCORD, CA 94520	Total Occupancy:	0
Phone #:	(925)825-7049		
Program Name:	SUNRISE HOUSE, INC.	Record ID:	
Legal Name:	SUNRISE HOUSE, INC.	Service Type:	RES
	2309 PLATT STREET	Resident Capacity:	
City, State:	MARTINEZ, CA 94520-	Total Occupancy:	8
Phone #:	(925)825-7049		
Program Name:	THE RECTORY WOMEN'S RECOVERY CENTER	Record ID:	070008AN
Legal Name:	UJIMA FAMILY RECOVERY SERVICES	Service Type:	RES
Address:	1901 CHURCH LANE	Resident Capacity:	12
City, State:	SAN PABLO, CA 94806	Total Occupancy:	21
Phone #:	(510)236-3134		
Program Name:	LA CASA UJIMA	Record ID:	070008DN
-	UJIMA FAMILY RECOVERY SERVICES	Service Type:	

Resident Capacity: 3 Total Occupancy: 6

As of: 04/06/2005 Contra Costa County

Program Name: LA CASA UJIMA

Legal Name: UJIMA FAMILY RECOVERY SERVICES

Address: 004 MELLUS STREET.

Record ID: 070008BN
Service Type: RES

Address: 904 MELLUS STREET Resident Capacity: 12 City, State: MARTINEZ, CA 94533 Total Occupancy: 18

Phone #: (925)229-4065

Program Name: UJIMA WEST - INTENSIVE DAY TREATMENT PROGRAM

Legal Name: UJIMA FAMILY RECOVERY SERVICES

Record ID: 070008CN

Service Type: NON

Address: 3939 BISSELL AVENUE Resident Capacity: 0
City, State: RICHMOND, CA 94805 Total Occupancy: 0

Phone #: (510)215-2280

Program Name: ELENA HOPKINS' TRANSITION HOUSE
Legal Name: UJIMA FAMILY RECOVERY SERVICES
Address: 1515 24TH STREET
Resident Capacity: 7

City, State: RICHMOND, CA 94806- Total Occupancy: 7

Phone #: (510)236-3139

Program Name: THE RECTORY WOMEN'S RECOVERY CENTER - C.J. HAWKINS TRAN! Record ID: 070008IN

Legal Name:UJIMA FAMILY RECOVERY SERVICESService Type:RESAddress:2937 17TH STREETResident Capacity:3City, State:SAN PABLO, CA 94806-Total Occupancy:6

Phone #: (510)236-3134

Program Name: THE RECTORY WOMEN'S RECOVERY CENTER
Legal Name: UJIMA FAMILY RECOVERY SERVICES
RES

Record ID: 070008HN
Service Type: RES

Address: 1916 CHURCH LANE Resident Capacity: 3
City, State: SAN PABLO, CA 94806- Total Occupancy: 6

Phone #: (510)236-3134

Program Name: ROSEMARY CORBIN HOUSE Record ID: 070008KN

Legal Name:UJIMA FAMILY RECOVERY SERVICESService Type:RESAddress:127 GRENADINE WAYResident Capacity:6City, State:HERCULES, CA 94547-Total Occupancy:12

Phone #: (510)799-1570

Program Name: UJIMA EAST - INTENSIVE DAY TREATMENT PROGRAM Record ID: 070008EN

Legal Name:UJIMA FAMILY RECOVERY SERVICESService Type:NONAddress:369 EAST LELAND ROADResident Capacity:0City, State:PITTSBURG, CA 94565Total Occupancy:0

Phone #: (925)427-9100

State of California Department of Alcohol and Drug Programs Licensed Residential Facilities and/or Certified Alcohol and Drug Programs As of: 04/06/2005 Del Norte County

Program Name: DEL NORTE MENTAL HEALTH AND SUBSTANCE ABUSE PROGRAMS Record ID: 080003AN

Legal Name:DEL NORTE COUNTYService Type:NONAddress:384 ELK VALLEY ROADResident Capacity:0City, State:CRESCENT CITY, CA 95531-Total Occupancy:0

Phone #: (707)464-7224

As of: 04/06/2005 El Dorado County

Address: 893 SPRING STREET Resident Capacity: 0
City, State: PLACERVILLE, CA 95667 Total Occupancy: 0

Phone #: (530)622-8193

Program Name: NARCONON OF NORTHERN CALIFORNIA - PLACERVILLE Record ID: 090018AN

Legal Name: NARCONON OF NORTHERN CALIFORNIA

Address: 1364 RUTH HAVEN LANE

City, State: PLACERVILLE, CA 95667
Total Occupancy: 18

Phone #: (530)295-5550

Program Name: NEW MORNING YOUTH AND FAMILY SERVICES Record ID: 090005AN

Legal Name: NEW MORNING YOUTH AND FAMILY SERVICES, INC.

Address: 6765 GREEN VALLEY ROAD

City, State: PLACERVILLE, CA 95667

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (530)622-5551

Program Name: PROGRESS HOUSE MEN'S FACILITY Record ID: 090002AN

Legal Name:PROGRESS HOUSE, INC.Service Type:RESAddress:838 BEACH COURT ROADResident Capacity:20City, State:COLOMA, CA 95613Total Occupancy:20

Phone #: (530)626-7252

Program Name: PROGRESS HOUSE PERINATAL FACILITY Record ID: 090002EN

Legal Name: PROGRESS HOUSE, INC.

Service Type: RES

Address: 5494 PONY EXPRESS TRAIL, HOUSE 1 Resident Capacity: 2
City, State: CAMINO, CA 95709- Total Occupancy: 4

Phone #: (530)644-3758

Program Name: PROGRESS HOUSE PERINATAL FACILITY Record ID: 090002FN

Legal Name: PROGRESS HOUSE, INC. Service Type: RES
Address: 5494 PONY EXPRESS TRAIL, HOUSE 4 Resident Capacity: 6

City, State: CAMINO, CA 95709- Total Occupancy: 10

Phone #: (530)644-3758

Program Name: PROGRESS HOUSE PERINATAL FACILITY Record ID: 090002GN

Legal Name: PROGRESS HOUSE, INC.

Address: 5494 PONY EXPRESS TRAIL, HOUSE 2

City, State: CAMINO, CA 95709
Total Occupancy: 10

Phone #: (530)644-3758

Program Name: PROGRESS HOUSE WOMEN AND CHILDREN'S FACILITY Record ID: 090002BN

Legal Name: PROGRESS HOUSE, INC.

Address: 5607 MOUNT MURPHY ROAD

City, State: GARDEN VALLEY, CA 95633

Service Type: RES

Resident Capacity: 16

Total Occupancy: 28

Phone #: (530)333-9460

As of: 04/06/2005 *El Dorado County*

Program Name: PROGRESS HOUSE PERINATAL FACILITY Record ID: 090002HN Legal Name: PROGRESS HOUSE, INC. Service Type: RES

Address: 5494 PONY EXPRESS TRAIL, HOUSE 3 Resident Capacity: 6

City, State: CAMINO, CA 95709- Total Occupancy: 10

Phone #: (530)644-3758

Program Name: PROGRESS HOUSE PERINATAL FACILITY Record ID: 090002IN

Legal Name: PROGRESS HOUSE, INC. Service Type: RES

Address: 5494 PONY EXPRESS TRAIL, HOUSE 5 Resident Capacity: 2
City, State: CAMINO, CA 95709- Total Occupancy: 4

Phone #: (530)644-3758

Program Name: PROGRESS HOUSE OUTPATIENT SERVICES Record ID: 090002CN

Legal Name: PROGRESS HOUSE, INC. Service Type: NON

Address: 2914 COLD SPRINGS ROAD, SUITE A Resident Capacity: 0
City, State: PLACERVILLE, CA 95667 Total Occupancy: 0

Phone #: (530)642-1715

Program Name: SHINGLE SPRINGS TRIBAL HEALTH PROGRAM Record ID: 090017AN

Legal Name: SHINGLE SPRINGS RANCHERIA Service Type: NON
Address: 4140 MOTHER LODE DRIVE, SUITE 104 Resident Capacity: 0
City, State: SHINGLE SPRINGS, CA 95680- Total Occupancy: 0

Phone #: (530)672-8059

Program Name: SIERRA RECOVERY CENTER Record ID: 090003DN

Legal Name: SIERRA RECOVERY CENTER Service Type: RES-DETOX

Address: 921 MACINAW STREET, UNIT 1 Resident Capacity: 6

City, State: SOUTH LAKE TAHOE, CA 96150- Total Occupancy: 6

Phone #: (530)541-5440

Program Name: SIERRA RECOVERY CENTER Record ID: 090003FN
Legal Name: SIERRA RECOVERY CENTER Service Type: RES-DETOX

Address: 921 MACINAW STREET, UNIT 3 Resident Capacity: 6
City, State: SOUTH LAKE TAHOE, CA 96150- Total Occupancy: 6

Phone #: (530)541-5440

Program Name: SIERRA RECOVERY CENTER Record ID: 090003GN
Legal Name: SIERRA RECOVERY CENTER Service Type: RES-DETOX

Address: 921 MACINAW STREET, UNIT 4

Resident Capacity: 6

City, State: SOUTH LAKE TAHOE, CA 96150- Total Occupancy: 6

Phone #: (530)541-5440

Program Name: SIERRA RECOVERY CENTER Record ID: 090003CN

Legal Name:SIERRA RECOVERY CENTERService Type:RESAddress:931 MACINAW AVENUEResident Capacity:11City, State:SOUTH LAKE TAHOE, CA 96150Total Occupancy:11

Phone #: (530)541-5190

As of: 04/06/2005 El Dorado County

Program Name: SIERRA RECOVERY CENTER Record ID: 090003BN Legal Name: SIERRA RECOVERY CENTER Service Type: NON
Address: 972-B TALLAC AVENUE Resident Capacity: 0
City, State: SOUTH LAKE TAHOE, CA 96150 Total Occupancy: 0

Phone #: (530)541-5190

Program Name: SIERRA RECOVERY CENTER Record ID: 090003AN
Legal Name: SIERRA RECOVERY CENTER Service Type: RES

Address: 2677 REAVES STREET Resident Capacity: 14

City, State: SOUTH LAKE TAHOE, CA 96150 Total Occupancy: 14

Phone #: (530)541-5190

Program Name: TAHOE TURNING POINT - MOUNTAIN
Legal Name: TAHOE TURNING POINT - MOUNTAIN
Address: 1804 13TH STREET
City, State: SOUTH LAKE TAHOE, CA 96150Record ID: 090014BN
Service Type: DSS
Resident Capacity: 0
Total Occupancy: 0

Phone #: (530)541-0612

Program Name: TAHOE TURNING POINT - HEAVENLY
Legal Name: TAHOE TURNING POINT - Service Type: DSS
Address: 1415 KELLER
City, State: SOUTH LAKE TAHOE, CA 96150Total Occupancy: 0

Phone #: (530)542-1200

Program Name: TAHOE TURNING POINT (MEYERS HOUSE)

Legal Name: TAHOE TURNING POINT

Address: 1154 COUNTRY CLUB DRIVE

City, State: SOUTH LAKE TAHOE, CA 96150
Record ID: 090014DN

Service Type: DSS

Resident Capacity: 0

Total Occupancy: 0

Phone #: (530)577-5340

Program Name: TAHOE TURNING POINT - MEADOWS
Legal Name: TAHOE TURNING POINT Service Type: DSS
Address: 930 MULE DEER CIRCLE
City, State: SOUTH LAKE TAHOE, CA 96150- Total Occupancy: 0

Phone #: (530)577-1722

Program Name: TAHOE YOUTH AND FAMILY SERVICES Record ID: 090006AN Legal Name: TAHOE YOUTH AND FAMILY SERVICES Service Type: NON

Address: 1021 FREMONT AVENUE Resident Capacity: 0

City, State: SOUTH LAKE TAHOE, CA 96150- Total Occupancy: 0

Phone #: (530)541-2445

Program Name: THE GATES RECOVERY FOUNDATION DETOXIFICATION FACILITY
Legal Name: THE GATES RECOVERY FOUNDATION
Record ID: 090016AN
Service Type: RES-DETOX

Address: 2810 COLOMA STREET Resident Capacity: 6
City, State: PLACERVILLE, CA 95667- Total Occupancy: 6

Phone #: (530)622-9500

Record ID: 090016CN

Record ID: 090016BN

Service Type: NON

El Dorado County As of: 04/06/2005

Program Name: THE GATES RECOVERY FOUNDATION OUTPATIENT SERVICES

Legal Name: THE GATES RECOVERY FOUNDATION

Address: 1864 BROADWAY STREET Resident Capacity: 0 Total Occupancy: 0 City, State: PLACERVILLE, CA 95667-

Phone #: (000)000-0000

Program Name: OUTPATIENT AND DAY TREATMENT COUNSELING SERVICES

Legal Name: THE GATES RECOVERY FOUNDATION

Service Type: NON Resident Capacity: 0 Address: 2810 COLOMA STREET City, State: PLACERVILLE, CA 95667-Total Occupancy: 0

Phone #: (530)622-9500

Program Name: 20/20 VIZION RESIDENTIAL TREATMENT CENTER Record ID: 100059AN Legal Name: 20/20 VISION RESIDENTIAL TREATMENT CENTER, INC. Service Type: RES

Address: 2232 NORTH LOMITA Resident Capacity: 4

City, State: FRESNO, CA 93703- Total Occupancy: 6

Phone #: (559)266-6940

Program Name: ADDICTION INTERVENTION RESOURCES, INC.
Legal Name: ADDICTION INTERVENTION RESOURCES, INC.
Address: 405 NORTH BROADWAY
City, State: FRESNO, CA 93701Record ID: 100045AP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (559)434-4589

Program Name: ADDICTION INTERVENTION RESOURCES, INC.
Legal Name: ADDICTION INTERVENTION RESOURCES, INC.
Address: 405 NORTH BROADWAY
Resident Capacity: 0

City, State: FRESNO, CA 93701- Total Occupancy: 0

Phone #: (559)486-3146

Program Name: ASI COUNSELING AND PROFESSIONAL SERVICES, INC.
Legal Name: ASI COUNSELING AND PROFESSIONAL SERVICES, INC.
Address: 2826 AND 2830 NORTH BLACKSTONE AVENUE
City, State: FRESNO, CA 93703Record ID: 100057AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)230-1694

Program Name: CALIFORNIA MENTAL HEALTH DRUG AND ALCOHOL PROGRAM Record ID: 100058AP

Legal Name: CALIFORNIA MENTAL HEALTH, INC.

Address: 2070 NORTH WINERY, SUITE 101

City, State: FRESNO, CA 93703
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (559)455-9400

Program Name: COMPREHENSIVE ALCOHOL PROGRAM Record ID: 100003AN
Legal Name: COMPREHENSIVE ALCOHOL PROGRAM, INCORPORATED Service Type: RES-DETOX

Address: 2445 WEST WHITESBRIDGE ROAD Resident Capacity: 75
City, State: FRESNO, CA 93706 Total Occupancy: 75

Phone #: (559)264-5096

Program Name:THE CRAMPED ROAD, INC.Record ID:100065APLegal Name:CRAMPED ROAD, INC.Service Type:NONAddress:3790 NORTH FIRST STREETResident Capacity:0City, State:FRESNO, CA 93726-Total Occupancy:0

Phone #: (559)225-4000

Program Name: CHOICES A ROAD TO RECOVERY
Legal Name: D.B.A., CHOICES A ROAD TO RECOVERY
Address: 2634 NORTH BLACKSTONE AVENUE
City, State: FRESNO, CA 93704Record ID: 100032AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)229-3733

Program Name: FOUNDATION FIRST RECOVERY ASSISTANCE PROGRAM
Legal Name: DANIEL "RICK" FLORES
Address: 2137 AMADOR STREET
City, State: FRESNO, CA 93721
Record ID: 100061AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)498-8084

Program Name: DELTA POINT Record ID: 100064AN Legal Name: DELTA POINT Service Type: NON Address: 707 NORTH FULTON, SUITE C Resident Capacity: 0

City, State: FRESNO, CA 93728
Total Occupancy: 0

Phone #: (559)486-0367

Program Name: ELEVENTH HOUR REHABILITATION PROGRAMS
Legal Name: ELEVENTH HOUR REHABILITATION PROGRAMS
Address: 5643 EAST WAVERLY LANE
City, State: FRESNO, CA 93727
Record ID: 100009DP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8

Phone #: (559)454-1819

Program Name: ELEVENTH HOUR REHABILITATION PROGRAMS-NONRESIDENTIAL Record ID: 100009FP Legal Name: ELEVENTH HOUR REHABILITATION PROGRAMS Service Type: NON Address: 5639 EAST PARK CIRCLE Resident Capacity: 0

City, State: FRESNO, CA 93727 Total Occupancy: 0

Phone #: (559)454-1819

Program Name: ELEVENTH HOUR REHABILITATION PROGRAMS
Legal Name: ELEVENTH HOUR REHABILITATION PROGRAMS
Address: 825 WEST ASHLAN AVENUE, SUITE 104
City, State: CLOVIS, CA 93612Record ID: 100009GP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)454-1819

Program Name: ELEVENTH HOUR REHABILITATION PROGRAMS

Legal Name: ELEVENTH HOUR REHABILITATION PROGRAMS

Record ID: 100009EP

Service Type: RES-DETOX

Address: 5639 EAST PARK CIRCLE Resident Capacity: 6
City, State: FRESNO, CA 93727 Total Occupancy: 8

Phone #: (559)454-1819

Program Name: EMINENCE HEALTHCARE, INC. Record ID: 100063AN Legal Name: EMINENCE HEALTHCARE, INC. Service Type: NON

Address: 2025 NORTH GATEWAY BOULEVARD, SUITE 104 Resident Capacity: 0

City, State: FRESNO, CA 93727- Total Occupancy: 0

Phone #: (559)458-7343

Program Name: NUESTRA CASA RECOVERY HOME Record ID: 100006AN

Legal Name:FRESNO COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRUGService Type:RESAddress:1414 WEST KEARNEY BOULEVARDResident Capacity:16City, State:FRESNO, CA 93706Total Occupancy:18

Phone #: (559)485-0501

Program Name: FRESNO NEW CONNECTION, INC.
Legal Name: FRESNO NEW CONNECTION, INC.
Address: 4411 NORTH CEDAR, SUITE 108
City, State: FRESNO, CA 93726Total Occupancy: 0

Phone #: (559)248-1548

Program Name: GENESIS ALCOHOL AND DRUG ABUSE SERVICES Record ID: 100043AN Legal Name: GENESIS FAMILY CENTER Service Type: NON Address: 7475 NORTH PALM, SUITE 107 Resident Capacity: 0

City, State: FRESNO, CA 93711
Total Occupancy: 0

Phone #: (559)439-5437

Program Name: HC&C HOUSE, INC.

Legal Name: HC&C HOUSE, INC.

Record ID: 100044AN

Service Type: RES

Address: 1013 EAST JOLSON AVENUE Resident Capacity: 6
City, State: FRESNO, CA 93706- Total Occupancy: 6

Phone #: (559)264-5464

Program Name: KERMAN RECOVERY CENTER Record ID: 100032BP

Legal Name: JANET NELSON, D.B.A. KERMAN RECOVERY CENTER

Address: 735 SOUTH MADERA AVENUE

City, State: KERMAN, CA 93630
Total Occupancy: 0

Phone #: (559)842-6842

Program Name: LIFESTYLE IMPACT Record ID: 100047AP Legal Name: JOHN P. MUNOZ Service Type: NON

Address: 3746 NORTH FIRST STREET Resident Capacity: 0
City, State: FRESNO, CA 93726- Total Occupancy: 0

Phone #: (559)222-1711

Program Name: THE AVANTI PROGRAM Record ID: 100026AN

Legal Name: KINGS VIEW

Address: 1822 JENSEN AVENUE, SUITE 102

City, State: SANGER, CA 93657
Total Occupancy: 0

Phone #: (559)875-6300

Program Name: THE AVANTI PROGRAM Record ID: 100026GN

Legal Name:KINGS VIEWService Type:NONAddress:3800 MCCALL AVENUEResident Capacity:0City, State:SELMA, CA 93662-Total Occupancy:0

Phone #: (559)898-5100

Program Name: KINGS VIEW COMUNITY SERVICES Record ID: 100026EN

Legal Name: KINGS VIEW

Address: 4111 NORTH GOLDEN STATE BOULEVARD

City, State: FRESNO, CA 93722
Total Occupancy: 0

Phone #: (559)277-9880

Program Name:FRESNO FIRSTRecord ID:100042BNLegal Name:MENTAL HEALTH SYSTEMS, INC.Service Type:RESAddress:2855 WEST WHITESBRIDGE ROADResident Capacity:95City, State:FRESNO, CA 93706-Total Occupancy:120

Phone #: (559)233-0446

Program Name: FRESNO CENTER FOR CHANGE Record ID: 100042AN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON
Address: 190 NORTH VAN NESS STREET Resident Capacity: 0
City, State: FRESNO, CA 93701- Total Occupancy: 0

Phone #: (559)237-8337

Program Name: PANACEA, INC. - COMPREHENSIVE DRUG AND ALCOHOL TREATME! Record ID: 100052DP Legal Name: PANACEA, INC. Service Type: NON
Address: 4928 EAST CLINTON AVENUE, SUITE 108 Resident Capacity: 0
City, State: FRESNO, CA 93727- Total Occupancy: 0

Phone #: (559)281-3054

Program Name: PANACEA, INC. - COMPREHENSIVE DRUG AND ALCOHOL TREATMEI Record ID: 100052CP Legal Name: PANACEA, INC. Service Type: NON
Address: 1617 E SAGINAW, #109 Resident Capacity: 0
City, State: FRESNO, CA 93704- Total Occupancy: 0

Phone #: (559)281-3054

Program Name: PANACEA, INC. - COMPREHENSIVE DRUG AND ALCOHOL TREATMEI Record ID: 100052AP Legal Name: PANACEA, INC. Service Type: NON Address: 2445 WEST DAKOTA AVENUE, #107 Resident Capacity: 0 City, State: FRESNO, CA 93705- Total Occupancy: 0

Phone #: (559)281-3054

Program Name: TURTLE LODGE Record ID: 100007AN Legal Name: SIERRA TRIBAL CONSORTIUM, INC. Service Type: RES

Address: 610 WEST MCKINLEY AVENUE Resident Capacity: 22
City, State: FRESNO, CA 93728 Total Occupancy: 37

Phone #: (559)445-2691

Program Name:SPIRIT OF WOMAN OF CALIFORNIARecord ID:100036ANLegal Name:SPIRIT OF WOMAN OF CALIFORNIA, INC.Service Type:RESAddress:327 WEST BELMONT AVENUEResident Capacity:63City, State:FRESNO, CA 93728-Total Occupancy:215

Phone #: (559)244-4353

Program Name: SPIRIT OF WOMAN OF CALIFORNIA, INC.

Legal Name: SPIRIT OF WOMAN OF CALIFORNIA, INC.

Address: 327 WEST BELMONT AVENUE, SUPPORTIVE SERVICES BUILDIN Resident Capacity: 0

City, State: FRESNO, CA 93728
Total Occupancy: 0

Phone #: (559)244-4353

Program Name: STATE HEALTH CARE DUAL DIAGNOSIS PROGRAM
Legal Name: STATE HEALTH CARE DUAL DIAGNOSIS PROGRAM
Address: 1145 WEST HEDGES
City, State: FRESNO, CA 93728
Record ID: 100056AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)233-5678

Program Name: STATE HEALTH CARE DUAL DIAGNOSIS PROGRAM
Legal Name: STATE HEALTH CARE DUAL DIAGNOSIS PROGRAM
Address: 4721 WEST JENNIFER, SUITE 19
City, State: FRESNO, CA 93722-6498
Record ID: 100056BP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)233-5678

Program Name: KING OF KINGS OUTPATIENT DRUG SERVICES - WEST FRESNO Record ID: 100024EN

Legal Name: THE KING OF KINGS COMMUNITY CENTER

Address: 2385 SOUTH FAIRVIEW

City, State: FRESNO, CA 93706

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (559)237-4115

Program Name: KING OF KINGS PREGNANT AND POST PARTUM OUTPATIENT PROGI Record ID: 100024BN Legal Name: THE KING OF KINGS COMMUNITY CENTER Service Type: NON

Address: 1350 EAST ANNADALE Resident Capacity: 0
City, State: FRESNO, CA 93706 Total Occupancy: 0

Phone #: (559)486-8200

Program Name: KING OF KINGS MEN'S RECOVERY HOME Record ID: 100024AN Legal Name: THE KING OF KINGS COMMUNITY CENTER Service Type: RES

Address: 2267 SOUTH GENEVA AVENUE Resident Capacity: 10

City, State: FRESNO, CA 93706 Total Occupancy: 10

Phone #: (559)266-6449

Program Name: TOWER RECOVERY CENTER Record ID: 100033AP Legal Name: TOWER RECOVERY CENTER, INC. Service Type: NON
Address: 707 NORTH FULTON, SUITE 101 Resident Capacity: 0
City, State: FRESNO, CA 93728 Total Occupancy: 0

Phone #: (559)486-6080

Program Name: TURNING POINT SUBSTANCE ABUSE TREATMENT UNIT (SATU) Record ID: 100028AN

Legal Name:TURNING POINT OF CENTRAL CALIFORNIA, INC.Service Type:RESAddress:2904 EAST BELGRAVIAResident Capacity:50City, State:FRESNO, CA 93721Total Occupancy:54

Phone #: (559)264-2932

Program Name: TURNING POINT SATU AFTERCARE Record ID: 100028BN Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC. Service Type: NON Address: 1638 L STREET Resident Capacity: 0

Address: 1638 L STREET Resident Capacity: 0
City, State: FRESNO, CA 93721 Total Occupancy: 0

Phone #: (559)264-2932

Program Name: TURNING POINT CCC - FRESNO Record ID: 100028DN Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC. Service Type: RES

Address: 3547 SOUTH GOLDEN STATE BOULEVARD Resident Capacity: 30 City, State: FRESNO, CA 93725 Total Occupancy: 40

Phone #: (559)442-8075

Program Name: TURNING POINT FRESNO REENTRY CENTER
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.

Record ID: 100028GN
Service Type: RES

Address: 2369 SOUTH G STREET, ROOMS 14-20 AND 22-24 Resident Capacity: 40 City, State: FRESNO, CA 93721- Total Occupancy: 90

Phone #: (559)233-0515

Program Name: QUEST HOUSE Record ID: 100028EN

Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.

Address: 2731 WEST OLIVE AVENUE

City, State: FRESNO, CA 93728
Total Occupancy: 26

Phone #: (559)233-5096

Program Name: UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC. Record ID: 100066AP Legal Name: UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC. Service Type: NON

Address: 3170 NORTH CHESTNUT, SUITES 105 & 105-A Resident Capacity: 0 ity, State: FRESNO, CA 93703- Total Occupancy: 0

City, State: FRESNO, CA 93703-

Phone #: (559)252-5150

Program Name: WESTCARE CALIFORNIA Record ID: 100010FN
Legal Name: WESTCARE CALIFORNIA, INC. Service Type: RES-DETOX

Address: 2772 SOUTH MARTIN LUTHER KING BOULEVARD Resident Capacity: 299
City, State: FRESNO, CA 93706- Total Occupancy: 349

Phone #: (559)265-4800

Program Name: WESTCARE CALIFORNIA, INC.

Record ID: 100010IN

Sorving Type: NON

Legal Name:WESTCARE CALIFORNIA, INC.Service Type:NONAddress:611 EAST BELMONTResident Capacity:0City, State:FRESNO, CA 93701-Total Occupancy:0

Phone #: (559)237-3420

Program Name: WESTCARE CALIFORNIA - ADOLESCENT SERVICES Record ID: 100010GN

Legal Name: WESTCARE CALIFORNIA, INC.

Address: 2727 NORTH GROVE INDUSTRIAL DRIVE, BUILDING 155

City, State: FRESNO, CA 93727
Total Occupancy: 0

Phone #: (559)455-5988

Program Name: WESTCARE CALIFORNIA - ADULT OUTPATIENT SERVICES Record ID: 100010HN

Legal Name: WESTCARE CALIFORNIA, INC. Service Type: NON
Address: 2772 SOUTH MARTIN LUTHER KING BOULEVARD Resident Capacity: 0

Address: 2772 SOUTH MARTIN LUTHER KING BOULEVARD Resident Capacity: 0
City, State: FRESNO, CA 93706- Total Occupancy: 0

Phone #: (559)251-4800

As of: 04/06/2005 *Glenn County*

Program Name: GLENN COUNTY SUBSTANCE ABUSE PROGRAM

Legal Name: GLENN COUNTY HEALTH SERVICES

Address: 1187 EAST SOUTH STREET City, State: ORLAND, CA 95963-1640

Phone #: (530)865-1146

Program Name: NORTHERN VALLEY INDIAN HEALTH, INC.

Legal Name: NORTHERN VALLEY INDIAN HEALTH, INC.

Address: 207 WEST BUTTE STREET City, State: WILLOWS, CA 95988-

Phone #: (530)934-9293

Record ID: 110001AN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Record ID: 110002AN Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

As of: 04/06/2005 *Humboldt County*

Program Name: ALCOHOL/DRUG CARE SERVICE/LEE BROWN TRMT CENTER/BONNII Record ID: 120009AN Legal Name: ALCOHOL/DRUG CARE SERVICE'S, INC. Service Type: RES-DETOX

Address: 1321, 1335 C STREET AND 217 14TH STREET

City, State: EUREKA, CA 95501

Resident Capacity: 21

Total Occupancy: 25

Phone #: (707)445-1391

Program Name: ALCOHOL/DRUG CARE SERVICE'S, INC.

Legal Name: ALCOHOL/DRUG CARE SERVICE'S, INC.

Service Type: NON

Address: 529 5TM STREET.

Address: 528 5TH STREET Resident Capacity: 0
City, State: EUREKA, CA 95501- Total Occupancy: 0

Phone #: (707)445-1391

Program Name: J STREET PROGRAM Record ID: 120009CN

Legal Name:ALCOHOL/DRUG CARE SERVICES, INC.Service Type:RESAddress:1742 J STREETResident Capacity:8City, State:EUREKA, CA 95501-Total Occupancy:8

Phone #: (707)442-6202

Program Name: ALCOHOL AND OTHER DRUGS PROGRAM Record ID: 120017AN

Legal Name: BEAR RIVER BAND OF ROHNERVILLE RANCHERIA Service Type: NON
Address: 27 BEAR RIVER DRIVE, AOD OFFICE AND LIBRARY
City, State: LOLETA, CA 95551- Total Occupancy: 0

Phone #: (707)733-1900

Program Name: FORTUNA COMMUNITY SERVICES; AVATAR PROGRAM Record ID: 120012AN

Legal Name:FORTUNA COMMUNITY SERVICESService Type:NONAddress:2331 ROHNERVILLE ROADResident Capacity:0City, State:FORTUNA, CA 95540-Total Occupancy:0

Phone #: (707)725-1166

Program Name: OUTPATIENT TREATMENT SERVICES Record ID: 120010AN

Legal Name: HUMBOLDT COUNTY ALCOHOL AND OTHER DRUG PROGRAMS

Address: 720 WOOD STREET

City, State: EUREKA, CA 95501

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (707)445-6250

Program Name: HUMBOLDT COUNTY SACPA PROGRAM Record ID: 120010BN

Legal Name: HUMBOLDT COUNTY ALCOHOL AND OTHER DRUG PROGRAMS

Address: 104 W STREET

City, State: EUREKA, CA 95501
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (707)268-2600

Program Name: HEALTHY MOMS PROGRAM Record ID: 120011AN

Legal Name:HUMBOLDT COUNTY DEPARTMENT OF PUBLIC HEALTHService Type:NONAddress:2910 H STREETResident Capacity:0City, State:EUREKA, CA 95501Total Occupancy:0

Phone #: (707)441-5220

Humboldt County As of: 04/06/2005

Program Name: HUMBOLDT RECOVERY CENTER Record ID: 120001BN Legal Name: HUMBOLDT RECOVERY CENTER, INCORPORATED Service Type: RES Resident Capacity: 23 Address: 905 L STREET, AND 1116 AND 1120 9TH STREET Total Occupancy: 23 City, State: EUREKA, CA 95502-

Phone #: (707)443-0514

Program Name: HUMBOLDT RECOVERY CENTER Record ID: 120001AN Legal Name: HUMBOLDT RECOVERY CENTER, INCORPORATED Service Type: RES

Resident Capacity: 23 Address: 1303 11TH STREET AND 1024 N STREET Total Occupancy: 23 City, State: EUREKA, CA 95501

Phone #: (707)443-4237

Program Name: HUMBOLDT RECOVERY CENTER Record ID: 120001DN Service Type: RES Legal Name: HUMBOLDT RECOVERY CENTER, INCORPORATED

Resident Capacity: 18 Address: 944 N STREET AND 1219 10TH STREET City, State: EUREKA, CA 95501-Total Occupancy: 18

Phone #: (707)443-0514

Program Name: CROSSROADS Record ID: 120005AN

Service Type: RES Legal Name: NORTH COAST SUBSTANCE ABUSE COUNCIL Address: 1205 MYRTLE AVENUE Resident Capacity: 20 Total Occupancy: 20 City, State: EUREKA, CA 95501

Phone #: (707)445-0869

Record ID: 120005BN Program Name: NORTH COAST SUBSTANCE ABUSE COUNCIL Service Type: NON Legal Name: NORTH COAST SUBSTANCE ABUSE COUNCIL Resident Capacity: 0 Address: 1364 MYRTLE AVENUE Total Occupancy: 0

Phone #: (707)445-0180

City, State: EUREKA, CA 95501-

Program Name: SINGING TREES RECOVERY CENTER Record ID: 120008AP Service Type: RES-DETOX Legal Name: SINGING TREES RECOVERY CENTER

Address: 2061 HIGHWAY 101 Resident Capacity: 20 Total Occupancy: 23 City, State: GARBERVILLE, CA 95542

Phone #: (707)247-3495

Record ID: 120016AN Program Name: ALCOHOL CHEMICAL TREATMENT SERIES A.C.T.S. Legal Name: THE PENTECOSTALS OF SOUTH HUMBOLDT Service Type: NON Address: 2434 NEWBURG ROAD Resident Capacity: 0 Total Occupancy: 0 City, State: FORTUNA, CA 95540-

Phone #: (707)725-2627

Record ID: 120015AN Program Name: UNITED INDIAN HEALTH SERVICES, INC.-CHILD & FAMILY SERVICE

Service Type: NON Legal Name: UNITED INDIAN HEALTH SERVICES, INC. Address: 1600 WEEOT WAY Resident Capacity: 0

City, State: ARCATA, CA 95521-Total Occupancy: 0

Phone #: (707)825-5060

As of: 04/06/2005 Imperial County

Program Name: FORT YUMA ALCOHOL AND DRUG ABUSE PREVENTION PROGRAM Record ID: 130003AN Legal Name: FORT YUMA ALCOHOL AND DRUG ABUSE PREVENTION PROGRAM Service Type: NON Address: 1888 SAN PASQUAL SCHOOL ROAD Resident Capacity: 0

City, State: WINTERHAVEN, CA 92283- Total Occupancy: 0

Phone #: (760)572-0232

Program Name: VOLUNTEERS OF AMERICA--KELLEY ADOLESCENT TREATMENT CE Record ID: 130001CN Legal Name: VOLUNTEERS OF AMERICA SOUTHWEST CALIFORNIA CORPORATIC Service Type: RES

Address: 312 NORTH LOOP ROAD Resident Capacity: 0
City, State: EL CENTRO, CA 92243- Total Occupancy: 0

Phone #: (760)370-0555

Program Name: VOLUNTEERS OF AMERICA, IMPERIAL ALCOHOL & DRUG SERVICES Record ID: 130001AN Legal Name: VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORA Service Type: RES-DETOX

Address: 1331 CLARK ROAD, SUITE B Resident Capacity: 29
City, State: EL CENTRO, CA 92243 Total Occupancy: 29

Phone #: (760)353-8482

Program Name: INYO COUNTY

Legal Name: INYO COUNTY HEALTH AND HUMAN SERVICES

Address: 162 GROVE STREET

Record ID: 140002AN
Service Type: NON

Recident Consoitu: 0

Address: 162 GROVE STREET Resident Capacity: 0
City, State: BISHOP, CA 93514- Total Occupancy: 0

Phone #: (760)873-6533

Program Name: ALPINE RECOVERY CENTER

Record ID: 140001AP

Legal Name:ROBERT B. DIBBLEService Type:NONAddress:375 EAST LINE STREETResident Capacity:0City, State:BISHOP, CA 93514Total Occupancy:0

Phone #: (760)873-4357

As of: 04/06/2005 *Kern County*

Program Name: A ROSE OF SHARON RETREAT AND RECOVERY CENTER
Legal Name: A ROSE OF SHARON RETREATS, INC.
Record ID: 150042AN
Service Type: RES

Address: 508 LELAND AVENUE Resident Capacity: 6
City, State: BAKERSFIELD, CA 93304Total Occupancy: 6

Phone #: (661)836-3006

Program Name: AEGIS INSTITUTE, INC., ODF TREATMENT PROGRAMS Record ID: 150017CN

Legal Name: AEGIS INSTITUTE, INC.

Address: 501 WEST COLUMBUS STREET

City, State: BAKERSFIELD, CA 93301
Total Occupancy: 0

Phone #: (661)328-0245

Program Name: SEQUOIA LANDMARK HOME Record ID: 150044AN

Legal Name: CALIFORNIA COMMUNITY SERVICES, INC.

Address: 1825 BRUNDAGE LANE

City, State: BAKERSFIELD, CA 93304
Total Occupancy: 6

Phone #: (661)328-1686

Program Name: CASA DE AMIGOS COMMUNITY RESPITE CENTER, INC.
Legal Name: CASA DE AMIGOS COMMUNITY RESPITE CENTER, INC.
Address: 528 MONTEREY STREET
Resident Capacity: 24

Total Occupancy: 24

City, State: BAKERSFIELD, CA 93305-

Phone #: (661)633-0226

Program Name: AMERICAN INDIAN HEALTH PROJECT BAKERSFIELD Record ID: 150038AN

Legal Name:CHUMASH COUNCIL OF BAKERSFIELDService Type:NONAddress:1617 30TH STREETResident Capacity:0City, State:BAKERSFIELD, CA 93301-Total Occupancy:0

Phone #: (661)327-4030

Program Name: JASON'S RETREAT

Legal Name: CITIZENS FOR THE BETTERMENT OF COMMUNITY AND COUNTRY

Record ID: 150004AN

Service Type: RES-DETOX

Address: 600 BERNARD STREET, 2041 & 2112 NORTH KERN STREET, & 526 Resident Capacity: 40 City, State: BAKERSFIELD, CA 93305 Total Occupancy: 40

Phone #: (661)325-8510

Program Name: JASON'S RETREAT Record ID: 150004CN

Legal Name: CITIZENS FOR THE BETTERMENT OF COMMUNITY AND COUNTRY Service Type: NON Address: 504 BERNARD STREET Resident Capacity: 0
City, State: BAKERSFIELD, CA 93305 Total Occupancy: 0

Phone #: (661)325-8510

Program Name: JASON'S RETREAT CAPISTRANO COMMUNITY FOR WOMEN Record ID: 150004DN Legal Name: CITIZENS FOR THE BETTERMENT OF COMMUNITY AND COUNTRY, I Service Type: RES-DETOX

Address: 3316 LAVERNE AVENUE, SUITES A,B,C,D,E,F,G,H,I,J,K Resident Capacity: 60 City, State: BAKERSFIELD, CA 93309 Total Occupancy: 70

Phone #: (661)832-8504

As of: 04/06/2005 *Kern County*

Program Name: CAPISTRANO LINCOLN STREET RETREAT Record ID: 150004GN Legal Name: CITIZENS FOR THE BETTERMENT OF COMMUNITY AND COUNTRY, I Service Type: RES

Address: 708 LINCOLN STREET Resident Capacity: 16
City, State: BAKERSFIELD, CA 93305- Total Occupancy: 32

Phone #: (661)869-1795

Program Name: COLLEGE COMMUNITY SERVICES Record ID: 150031AN Legal Name: COLLEGE COMMUNITY SERVICES Service Type: NON

Address: 1400 NORTH NORMA, SUITE 133 Resident Capacity: 0

City, State: RIDGECREST, CA 93555- Total Occupancy: 0

Phone #: (760)449-7406

Program Name: COLLEGE COMMUNITY SERVICES
Legal Name: COLLEGE COMMUNITY SERVICES
Address: 113 EAST F STREET
City, State: TEHACHAPI, CA 93561Record ID: 150031CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)822-8223

Program Name: COLLEGE COMMUNITY SERVICES Record ID: 150031DN Legal Name: COLLEGE COMMUNITY SERVICES Service Type: NON
Address: 2731 NUGGET AVENUE Resident Capacity: 0
City, State: LAKE ISABELLA, CA 93240- Total Occupancy: 0

Phone #: (760)379-3412

Program Name: COLLEGE COMMUNITY SERVICES Record ID: 150031BN Legal Name: COLLEGE COMMUNITY SERVICES Service Type: NON
Address: 8101 BAY AVENUE Resident Capacity: 0
City, State: CALIFORNIA CITY, CA 93505- Total Occupancy: 0

Phone #: (760)373-2979

Program Name: COLLEGE COMMUNITY SERVICES Record ID: 150031EN Legal Name: COLLEGE COMMUNITY SERVICES Service Type: NON
Address: 2689 SIERRA HIGHWAY Resident Capacity: 0
City, State: ROSAMOND, CA 93560- Total Occupancy: 0

Phone #: (661)256-7208

Program Name: DE COLORES CENTER Record ID: 150011CN

Legal Name: COMMUNITY SERVICE ORGANIZATION BEHAVIORAL HEALTH PROC Service Type: NON Address: 8000 SEGRUE Resident Capacity: 0
City, State: LAMONT, CA 96241 Total Occupancy: 0

Phone #: (661)845-3753

Program Name: BROTHERHOOD CENTER Record ID: 150011BN

Legal Name: COMMUNITY SERVICE ORGANIZATION BEHAVIORAL HEALTH PROC Service Type: NON Address: 715 LAKE STREET Resident Capacity: 0
City, State: BAKERSFIELD, CA 93305 Total Occupancy: 0

Phone #: (661)327-9376

As of: 04/06/2005 *Kern County*

Program Name: KERN COUNTY MENTAL HEALTH TAFT CLINIC Record ID: 150036CN
Legal Name: COUNTY OF KERN, DEPARTMENT OF MENTAL HEALTH
Address: 1021 4TH STREET, SUITE B Resident Capacity: 0

Total Occupancy: 0

City, State: TAFT, CA 93268-Phone #: (661)763-8660

Program Name: THE WILLOWS RECOVERY CENTER Record ID: 150020AP

Legal Name: DONOHUE, MARY LYNN

Address: 407 HELEN WAY, 9301 OPAL STREET, AND 512 STABLE

City, State: BAKERSFIELD, CA 93307
Total Occupancy: 35

Phone #: (661)832-3098

Program Name: MCFARLAND COMMUNITY CORRECTIONAL FACILITY Record ID: 150043AP

Legal Name:GEO CALIFORNIA, INC.Service Type:RESAddress:120 TAYLOR AVENUEResident Capacity:224City, State:MCFARLAND, CA 93250-Total Occupancy:224

Phone #: (661)792-2731

Program Name: GOLDEN STATE TRANSITION CENTER Record ID: 150027AN Legal Name: GOLDEN STATE TRANSITION CENTER, INC. Service Type: RES

Address: 1201 MALOVICH ROAD, ROOMS 6-22 Resident Capacity: 43

City, State: ARVIN, CA 93203- Total Occupancy: 48

Phone #: (661)872-9389

Program Name: ALTERNATIVE SOLUTIONS EDUCATIONAL CLINICIANS
Legal Name: JOSEPH C. JONES, JR.

Record ID: 150034AP
Service Type: NON

Legal Name: JOSEPH C. JONES, JR. Service Type: NO.
Address: 2700 F STREET, SUITES 127 AND 129
City, State: BAKERSFIELD, CA 93301- Total Occupancy: 0

Phone #: (661)325-2732

Program Name: SERENITY HOUSE Record ID: 150003EN

Legal Name: KERN COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRUG Al Service Type: RES
Address: 2008 D STREET Resident Capacity: 6
City, State: BAKERSFIELD, CA 93301- Total Occupancy: 6

Phone #: (661)634-9737

Program Name: CASA DE ALMA Record ID: 150003GN

Legal Name: KERN COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRUG Al Service Type: RES
Address: 2024 20TH STREET Resident Capacity: 4
City, State: BAKERSFIELD, CA 93301- Total Occupancy: 4

Phone #: (661)634-9737

Program Name: ALMA DEL CAMINO NUEVO Record ID: 150003FN

Legal Name: KERN COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRUG Al Service Type: NON Address: 2008 D STREET Resident Capacity: 0
City, State: BAKERSFIELD, CA 93301- Total Occupancy: 0

Phone #: (661)634-9877

As of: 04/06/2005 *Kern County*

Program Name: KERN COUNTY MENTAL HEALTH DEPARTMENT - WEST KERN CLINI Record ID: 150036BN Legal Name: KERN COUNTY MENTAL HEALTH DEPARTMENT Service Type: NON Address: 930 F STREET Resident Capacity: 0

Address: 930 F STREET Resident Capacity: 0
City, State: WASCO, CA 93280- Total Occupancy: 0

Phone #: (661)758-7300

Program Name: LEGACY BEHAVIORAL SERVICES, INC.
Legal Name: LEGACY BEHAVIORAL SERVICES, INC.
Address: 544 WEST DRUMMOND AVENUE, SUITE B
City, State: RIDGECREST, CA 93555Total Occupancy: 0

Phone #: (760)499-1909

Program Name: LEGACY BEHAVIORAL SERVICES, INC.

Legal Name: LEGACY BEHAVIORAL SERVICES, INC.

Address: 2700 F STREET, SUITE 132

City, State: BAKERSFIELD, CA 93301
Record ID: 150039AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)861-1133

Program Name: LEGACY BEHAVIORAL SERVICES, INC.
Legal Name: LEGACY BEHAVIORAL SERVICES, INC.
Address: 2105 F STREET
City, State: BAKERSFIELD, CA 93301Record ID: 150039BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)861-1133

Program Name:LEGACY BEHAVIORAL SERVICES, INC.Record ID:150039ENLegal Name:LEGACY BEHAVIORAL SERVICES, INC.Service Type:RESAddress:2105 F STREETResident Capacity:23City, State:BAKERSFIELD, CA 93301-Total Occupancy:24

Phone #: (661)861-1133

Program Name: LEGACY BEHAVIORAL SERVICES, INC.
Legal Name: LEGACY BEHAVIORAL SERVICES, INC.
Address: 15664 K STREET, SUITES 1 & 7
City, State: MOJAVE, CA 93501Record ID: 150039CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)221-0472

Program Name: THE NAPD GENESIS PROGRAM (NEW ADVANCES FOR PEOPLE WITH Legal Name: NEW ADVANCES FOR PEOPLE WITH DISABILITIES Record ID: 150025AN Service Type: NON

Address: 1909 16TH STREET Resident Capacity: 0
City, State: BAKERSFIELD, CA 93301- Total Occupancy: 0

Phone #: (661)325-3003

Program Name: PHASE I PHASE II RECOVERY SERVICES

Legal Name: PHASE I PHASE II SOBER LIVING, INC.

Address: 708 COTTONWOOD ROAD

City, State: BAKERSFIELD, CA 93307
Record ID: 150045AN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (661)747-4661

As of: 04/06/2005 *Kern County*

Program Name: FREISE RECOVERY HOME FOR WOMEN
Legal Name: RESTORATION COMMUNITY PROJECT, INC.
Address: 721-725 8TH STREET
City, State: BAKERSFIELD, CA 93304Record ID: 150041AN
Service Type: RES
Resident Capacity: 50

Phone #: (661)633-5130

Program Name: 2ND GENESIS RECOVERY HOME FOR MEN
Legal Name: RESTORATION COMMUNITY PROJECT, INC.
Address: 1605 PACHECO AVENUE
City, State: BAKERSFIELD, CA 93307Record ID: 150041BN
Service Type: RES
Resident Capacity: 16

Phone #: (661)633-5130

Program Name: RESTORATION VILLAGE TREATMENT CENTER
Legal Name: RESTORATION VILLAGE TREATMENT CENTER
Address: 1670 GOLDEN STATE AVENUE
City, State: BAKERSFIELD, CA 93301Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)325-7461

Program Name: KERN FAMILY LIVING CENTER Record ID: 150040BN Legal Name: SEVEN FOLD, INC. Service Type: NON
Address: 655 SOUTH CENTRAL VALLEY HIGHWAY, TRAINING & PATIENT Resident Capacity: 0
City, State: SHAFTER, CA 93263- Total Occupancy: 0

Phone #: (661)805-0907

Program Name: KERN FAMILY LIVING CENTER Record ID: 150040AN Legal Name: SEVEN FOLD, INC. Service Type: NON
Address: 1627 VIRGINIA AVENUE, SUITES A AND D Resident Capacity: 0
City, State: BAKERSFIELD, CA 93307- Total Occupancy: 0

Phone #: (661)805-0907

Program Name:STEP II, INC.Record ID:150019ANLegal Name:STEP II, INC.Service Type:NONAddress:10822 ROSEDALE HIGHWAYResident Capacity:0City, State:BAKERSFIELD, CA 93312-Total Occupancy:0

Phone #: (661)587-8817

Program Name: TABITHA HOUSE, INC.

Legal Name: TABITHA'S HOUSE MINISTRIES, INC.

Address: 1415 18TH STREET, SUITE 510

City, State: BAKERSFIELD, CA 93301
Record ID: 150032AN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (661)637-1862

Program Name: THE WILLOWS RECOVERY CENTER
Legal Name: THE WILLOWS RECOVERY CENTER
Address: 407 HELEN WAY
City, State: BAKERSFIELD, CA 93307Record ID: 150020BP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)832-3098

As of: 04/06/2005 *Kern County*

Program Name: TURNING POINT MOTHER/INFANT PROGRAM
Legal Name: TURNING POINT OF CENTRAL CA., INC.
Address: 4941 DAVID ROAD
Resident Capacity: 23

City, State: BAKERSFIELD, CA 93307- Total Occupancy: 60

Phone #: (661)858-2975

Program Name: KENNEMER OUTPATIENT PROGRAM Record ID: 150013CN Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC. Service Type: NON

Address: 1120 UNION AVENUE Resident Capacity: 0
City, State: BAKERSFIELD, CA 93307- Total Occupancy: 0

Phone #: (661)325-5774

Program Name: TURNING POINT BAKERSFIELD RE-ENTRY
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.

Address: 1101 LINION AVENUE.

Position 20

Address: 1101 UNION AVENUE Resident Capacity: 20
City, State: BAKERSFIELD, CA 93307- Total Occupancy: 99

Phone #: (661)325-5774

Program Name: TURNING POINT AFTERCARE Record ID: 150013EN

Legal Name:TURNING POINT OF CENTRAL CALIFORNIA, INC.Service Type:NONAddress:1101 UNION AVENUEResident Capacity:0City, State:BAKERSFIELD, CA 93385-Total Occupancy:0

Phone #: (661)325-5774

Program Name: KEN KENNEMER SUBSTANCE ABUSE TREATMENT CENTER

Record ID: 150013BN

Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC. Service Type: RES-DETOX

Address: 1100 UNION AVENUE Resident Capacity: 130 City, State: BAKERSFIELD, CA 93305- Total Occupancy: 130

Phone #: (661)861-6111

Program Name: WESTCARE Record ID: 150029BN

Legal Name: WESTCARE CALIFORNIA, INC.

Address: 4520 CALIFORNIA AVENUE, SUITE 100

City, State: BAKERSFIELD, CA 93309
Total Occupancy: 0

Phone #: (661)321-3124

Program Name: WESTCARE CALIFORNIA Record ID: 150029AN Legal Name: WESTCARE CALIFORNIA, INC. Service Type: RES

Address: 2901-2913 SOUTH H STREET Resident Capacity: 62
City, State: BAKERSFIELD, CA 93304- Total Occupancy: 62

Phone #: (661)398-4303

As of: 04/06/2005 *Kings County*

Program Name: CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.
Legal Name: CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.
Address: 700 NORTH IRWIN STREET
City, State: HANFORD, CA 93230
Record ID: 160005AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)583-9300

Program Name: CORNERSTONE WOMEN'S AND PERINATAL PROGRAM
Legal Name: CORNERSTONE COMMUNITY ALCOHOL AND OTHER DRUG RECOVE Service Type: RES
Address: 817A, 817B, AND 817C WEST SEVENTH STREET Resident Capacity: 22
City, State: HANFORD, CA 93230 Total Occupancy: 29

Phone #: (559)583-2030

Program Name: CORNERSTONE RECOVERY CENTER Record ID: 160002BN

Legal Name: CORNERSTONE COMMUNITY ALCOHOL AND OTHER DRUG RECOVE Service Type: RES-DETOX

Address: 801, 805A, 805B, 807A, AND 807B WEST SEVENTH STREET

City, State: HANFORD, CA 93230

Resident Capacity: 29

Total Occupancy: 29

Phone #: (559)583-2033

Program Name: ALCOHOL AND DRUG EDUCATION COUNSELING CENTER
Legal Name: KINGS VIEW
Address: 1393 BAILEY DRIVE
City, State: HANFORD, CA 93230Record ID: 160004AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)582-9307

As of: 04/06/2005 *Lake County*

Program Name: DRUG ABUSE ALTERNATIVES CENTER
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 14709 LAKESHORE DRIVE
City, State: CLEARLAKE, CA 95422
Record ID: 170008AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)995-3235

Program Name: PSG - DR. GARDNER OUTPATIENT PROGRAM
Legal Name: GARDNER, ROBERT W. M.D.

Address: 6300 EAST HIGHWAY 20
City, State: LUCERNE, CA 95458
Record ID: 170007AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)274-9299

Program Name: CLEARLAKE CLINIC
Legal Name: LAKE COUNTY ALCOHOL AND OTHER DRUG SERVICES
Address: 7000-B SOUTH CENTER DRIVE
City, State: CLEARLAKE, CA 95422
Record ID: 170002BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)263-8162

Program Name: LAKE COUNTY DIVISION OF ALCOHOL AND OTHER DRUG SERVICE Record ID: 170002CN Legal Name: LAKE COUNTY ALCOHOL AND OTHER DRUG SERVICES Service Type: NON Address: 991 PARALLEL DRIVE, SUITE B Resident Capacity: 0
City, State: LAKEPORT, CA 95453- Total Occupancy: 0

Phone #: (707)263-4194

Program Name: PERSONAL SUPPORT GROUP MEN'S RECOVERY
Legal Name: PERSONAL SUPPORT GROUP
Address: 6438 SEVENTEENTH AVENUE
City, State: LUCERNE, CA 94558

Record ID: 170006AN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7

Phone #: (707)274-2335

Program Name:PERSONAL SUPPORT GROUP HILLTOP RECOVERYRecord ID:170006BPLegal Name:PERSONAL SUPPORT GROUPService Type:RESAddress:10155 SOCRATES MINE ROADResident Capacity:65City, State:MIDDLETOWN, CA 95461-Total Occupancy:65

Phone #: (707)987-9972

As of: 04/06/2005 *Lassen County*

Program Name: LASSEN COUNTY ALCOHOL AND DRUG PROGRAM
Legal Name: LASSEN COUNTY ALCOHOL AND DRUG PROGRAMS
Address: 476 ALEXANDER AVENUE
City, State: SUSANVILLE, CA 96130Resident Capacity: 0
Total Occupancy: 0

Phone #: (530)251-8112

Program Name: LASSEN COUNTY ALCOHOL AND DRUG PROGRAM - PROMISES PERI Record ID: 180001BN Legal Name: LASSEN COUNTY ALCOHOL AND DRUG PROGRAMS Service Type: NON

Address: 1400 CHESTNUT STREET, SUITE B Resident Capacity: 0
City, State: SUSANVILLE, CA 96130- Total Occupancy: 0

Phone #: (530)251-8112

As of: 04/06/2005 Los Angeles County

Program Name: A HOME FOR US
Legal Name: A HOME FOR US CORPORATION
Address: 2918 WEST VERNON AVENUE
City, State: LOS ANGELES, CA 90043Record ID: 190449AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)296-5449

Program Name: A STEP TO FREEDOM Record ID: 190355AN Legal Name: A STEP TO FREEDOM Service Type: RES

Address: 1665 SOUTH KINGSLEY DRIVE Resident Capacity: 6

City, State: LOS ANGELES, CA 90006- Total Occupancy: 6

Phone #: (323)733-6405

Program Name: ACTION FAMILY COUNSELING Record ID: 190315DP Legal Name: ACTION FAMILY COUNSELING, INC. Service Type: RES

Address: 30035 BOUQUET CANYON Resident Capacity: 6
City, State: SAUGUS, CA 91350- Total Occupancy: 6

Phone #: (661)297-2916

Program Name: ACTION FAMILY COUNSELING, INC.
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 23845 MCBEAN PARKWAY
City, State: VALENCIA, CA 91355Record ID: 190315CP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)713-3006

Program Name: ACTION FAMILY CENTER Record ID: 190315AP
Legal Name: ACTION FAMILY COUNSELING, INC.

Address: 3959 LAUREL CANYON BOULEVARD, SUITE F Resident Capacity: 0

Total Occupancy: 0

City, State: STUDIO CITY, CA 91604-

Phone #: (818)763-9557

Program Name: NOBLE REHABILITATION CENTER Record ID: 190428AN Legal Name: AFRIKAN CHRISTIAN CENTER, INC. Service Type: NON

Address: 250 WEST 85TH STREET Resident Capacity: 0

City, State: LOS ANGELES, CA 90003- Total Occupancy: 0

Phone #: (323)759-6963

Program Name: CHARLOTTE'S HOUSE Record ID: 190224AN Legal Name: AKILA CONCEPTS, INC. Service Type: RES

Address: 542 EAST CARSON STREET Resident Capacity: 9

City, State: CARSON, CA 90745- Total Occupancy: 24

Phone #: (310)952-1189

Program Name: ALCOHOLISM CENTER FOR WOMEN
Legal Name: ALCOHOLISM CENTER FOR WOMEN, INC.
Address: 1147 SOUTH ALVARADO STREET
Resident Capacity: 0

City, State: LOS ANGELES, CA 90006 Total Occupancy: 0

Phone #: (213)381-8500

Los Angeles County As of: 04/06/2005

Program Name: ALCOHOLISM CENTER FOR WOMEN Record ID: 190002BN Legal Name: ALCOHOLISM CENTER FOR WOMEN, INC. Service Type: RES Resident Capacity: 32 Address: 1135 SOUTH ALVARADO STREET Total Occupancy: 32 City, State: LOS ANGELES, CA 90006

Phone #: (213)381-8500

Program Name: ANTELOPE VALLEY COUNCIL ON ALCOHOLISM AND DRUG DEPEND Record ID: 190376BN Legal Name: ALCOHOLISM COUNCIL OF ANTELOPE VALLEY/NCA Service Type: NON Address: 38345 30TH STREET EAST Resident Capacity: 0 Total Occupancy: 0 City, State: PALMDALE, CA 93550-

Phone #: (661)271-1062

Program Name: ANTELOPE VALLEY COUNCIL ON ALCOHOLISM AND DRUG DEPEND Record ID: 190376AN Service Type: NON Legal Name: ALCOHOLISM COUNCIL OF ANTELOPE VALLEY/NCA Resident Capacity: 0 Address: 44815 FIG AVENUE, SUITE 101 City, State: LANCASTER, CA 93534-Total Occupancy: 0

Phone #: (661)948-5046

Program Name: NEW BEGINNING TREATMENT CENTER OUTPATIENT Record ID: 190456AP Service Type: NON Legal Name: ALEX KOPILEVICH Address: 22030 SHERMAN WAY, SUITE 115 Resident Capacity: 0 City, State: CANOGA PARK, CA 91303-Total Occupancy: 0

Phone #: (818)340-0230

Record ID: 190452CN Program Name: AMERICA UNITED CARES III Service Type: NON Legal Name: AMERICA UNITED CARES Resident Capacity: 0 Address: 157 MYRRH STREET Total Occupancy: 0 City, State: COMPTON, CA 90221-

Phone #: (310)200-5569

Record ID: 190452AN Program Name: AMERICA UNITED CARES Service Type: NON Legal Name: AMERICA UNITED CARES Address: 357 EAST PALMER STREET Resident Capacity: 0 Total Occupancy: 0 City, State: COMPTON, CA 90221-

Phone #: (310)200-5569

Record ID: 190452BN Program Name: AMERICA UNITED CARES II Legal Name: AMERICA UNITED CARES Service Type: NON Address: 312 SOUTH OLEANDER AVENUE Resident Capacity: 0 Total Occupancy: 0 City, State: COMPTON, CA 90220-

Phone #: (310)200-5569

Record ID: 190211BN Program Name: AMERICAN ASIAN PACIFIC SUBSTANCE ABUSE PROGRAM Service Type: NON Legal Name: AMERICAN ASIAN PACIFIC MINISTRIES, INC. Address: 4022 NORTH ROSEMEAD BOULEVARD Resident Capacity: 0 Total Occupancy: 0

City, State: ROSEMEAD, CA 91770

Phone #: (626)287-3475

As of: 04/06/2005 Los Angeles County

Program Name: AMERICAN DRUG TREATMENT PROGRAM
Legal Name: AMERICAN DRUG TREATMENT PROGRAM
Address: 3540 WILSHIRE BOULEVARD, SUITE 704
City, State: LOS ANGELES, CA 90010Record ID: 190395AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (213)384-3002

Program Name: AMERICAN HEALTH AND EDUCATION CLINICS
Legal Name: AMERICAN HEALTH AND EDUCATION CLINICS
Address: 3209 NORTH ALAMEDA STREET, SUITE C
City, State: COMPTON, CA 90222Record ID: 190422AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (310)537-2273

Program Name: AMERICAN INDIAN CHANGING SPIRITS
Legal Name: AMERICAN INDIAN CHANGING SPIRITS
Address: 2120 WILLIAMS STREET, BUILDING 1
City, State: LONG BEACH, CA 90810Record ID: 190239AN
Service Type: RES
Resident Capacity: 18

Phone #: (562)388-8118

Program Name: APEX Record ID: 190393AN

Legal Name: APEX FOUNDATION Service Type: NON
Address: 7231 SANTA MONICA BOULEVARD
City, State: WEST HOLLYWOOD, CA 90046- Total Occupancy: 0

Phone #: (323)851-4777

Program Name: ARMS OF GRACE HUMANITARIAN SERVICES, ADPCC
Legal Name: ARMS OF GRACE HUMANITARIAN SERVICES, ADPCC
Address: 5716 CRENSHAW BOULEVARD
City, State: LOS ANGELES, CA 90043Record ID: 190435AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (310)625-5424

Program Name: VAN NUYS ALCOHOL AND DRUG TREATMENT PROGRAM Record ID: 190327AP

Legal Name: ASHBEL & SHERMAN

Address: 14558 SYLVAN STREET

City, State: VAN NUYS, CA 91411
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (818)787-2828

Program Name: ASIAN-AMERICAN DRUG ABUSE PROGRAM
Legal Name: ASIAN-AMERICAN DRUG ABUSE PROGRAM
Address: 3838 MARTIN LUTHER KING, JR., BOULEVARD
City, State: LOS ANGELES, CA 90008
Total Occupancy: 0

Phone #: (323)294-4932

Program Name: ASIAN-AMERICAN DRUG ABUSE PROGRAM
Legal Name: ASIAN-AMERICAN DRUG ABUSE PROGRAM, INC.

Record ID: 190112AN
Service Type: RES

Address: 5318 SOUTH CRENSHAW BOULEVARD Resident Capacity: 27
City, State: LOS ANGELES, CA 90043 Total Occupancy: 27

Phone #: (323)293-6284

Los Angeles County As of: 04/06/2005

Program Name: ATLANTIC RECOVERY SERVICES RESIDENTIAL I Record ID: 190229BN Legal Name: ATLANTIC RECOVERY SERVICES Service Type: RES

Resident Capacity: 6 Address: 1417 EAST 9TH STREET Total Occupancy: 6 City, State: LONG BEACH, CA 90813-

Phone #: (562)436-3533

Program Name: ATLANTIC RECOVERY SERVICES Record ID: 190229AN Legal Name: ATLANTIC RECOVERY SERVICES Service Type: NON

Address: 944 PACIFIC AVENUE Resident Capacity: 0 Total Occupancy: 0 City, State: LONG BEACH, CA 90813-

Phone #: (562)436-3533

Program Name: ATLANTIC RECOVERY SERVICES RESIDENTIAL III Record ID: 190229DN

Service Type: RES Legal Name: ATLANTIC RECOVERY SERVICES Resident Capacity: 6 Address: 1415 B EAST 9TH STREET City, State: LONG BEACH, CA 90813-Total Occupancy: 6

Phone #: (562)436-3533

Program Name: ATLANTIC RECOVERY SERVICES RESIDENTIAL II Record ID: 190229CN

Service Type: RES Legal Name: ATLANTIC RECOVERY SERVICES Address: 1415 A EAST 9TH STREET Resident Capacity: 6 Total Occupancy: 6 City, State: LONG BEACH, CA 90813-

Phone #: (562)436-3533

Record ID: 190429AP Program Name: THE VILLA AT LAS ENCINAS Service Type: RES Legal Name: AURORA LAS ENCINAS, LLC Address: 2900 EAST DEL MAR BOULEVARD Resident Capacity: 8 Total Occupancy: 8

City, State: PASADENA, CA 91107-

Phone #: (000)000-0000

Record ID: 190391AN Program Name: AVALON CENTER FOR CHANGE Service Type: NON Legal Name: AVALON CENTER FOR CHANGE, INC. Address: 3429 OCEANVIEW BOULEVARD, SUITE E Resident Capacity: 0 Total Occupancy: 0 City, State: GLENDALE, CA 91208-

Phone #: (818)825-1338

Record ID: 190007ON Program Name: AMERICAN RECOVERY CENTER OUTPATIENT PROGRAM

Legal Name: BEHAVIORAL HEALTH SERVICES Service Type: NON Address: 2180 WEST VALLEY BOULEVARD Resident Capacity: 0 Total Occupancy: 0 City, State: POMONA, CA 91766-

Phone #: (909)865-2336

Record ID: 190007AN Program Name: HOLLYWOOD FAMILY RECOVERY CENTER Service Type: NON Legal Name: BEHAVIORAL HEALTH SERVICES, INC. Address: 6838 EAST SUNSET BOULEVARD Resident Capacity: 0

City, State: HOLLYWOOD, CA 90028 Total Occupancy: 0

Phone #: (323)461-3161

As of: 04/06/2005 Los Angeles County

Program Name:INGLEWOOD COMMUNITY RECOVERY CENTERRecord ID:190007BNLegal Name:BEHAVIORAL HEALTH SERVICES, INC.Service Type:NONAddress:404 EDGEWOOD STREETResident Capacity:0

Total Occupancy: 0

Total Occupancy: 0

Phone #: (310)673-5750

City, State: INGLEWOOD, CA 90302

Program Name:WILMINGTON COMMUNITY RECOVERY CENTERRecord ID:190007CNLegal Name:BEHAVIORAL HEALTH SERVICES, INC.Service Type:NONAddress:1318A NORTH AVALON BOULEVARDResident Capacity:0

City, State: WILMINGTON, CA 90744

Phone #: (310)549-2710

Program Name: PATTERNS Record ID: 190007FN

Legal Name:BEHAVIORAL HEALTH SERVICES, INC.Service Type:RESAddress:12917 CERISE AVENUEResident Capacity:23City, State:HAWTHORNE, CA 90250Total Occupancy:35

Phone #: (310)675-4431

Program Name: SOUTH BAY RECOVERY CENTER Record ID: 190007HN Legal Name: BEHAVIORAL HEALTH SERVICES, INC. Service Type: NON Address: 15519 CRENSHAW BOULEVARD Resident Capacity: 0

City, State: GARDENA, CA 90249

Total Occupancy: 0

Phone #: (310)679-9031

Program Name: BOYLE HEIGHTS FAMILY RECOVERY CENTER Record ID: 190007JN Legal Name: BEHAVIORAL HEALTH SERVICES, INC. Service Type: NON

Address: 3421 OLYMPIC BOULEVARD Resident Capacity: 0
City, State: LOS ANGELES, CA 90023 Total Occupancy: 0

Phone #: (323)262-1786

Program Name: BEHAVIORAL HEALTH SERVICES, INC.
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 4065 EAST WHITTIER BOULEVARD
City, State: LOS ANGELES, CA 90023Record ID: 190007NN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

City, State: LOS ANGELES, CA 90023-Phone #: (323)269-4890

Program Name: AMERICAN RECOVERY CENTER Record ID: 190007MN

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 2180 WEST VALLEY BOULEVARD, FLOORS 100, 300 AND 400

City, State: POMONA, CA 91768
Total Occupancy: 123

Phone #: (909)865-2336

Program Name: REDGATE MEMORIAL RECOVERY CENTER Record ID: 190007LN

Legal Name:BEHAVIORAL HEALTH SERVICES, INC.Service Type:DHSAddress:1775 CHESTNUT AVENUEResident Capacity:0City, State:LONG BEACH, CA 90813Total Occupancy:0

Phone #: (562)599-8444

As of: 04/06/2005 Los Angeles County

Program Name: LINCOLN HEIGHTS FAMILY RECOVERY CENTER
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 4099 NORTH MISSION ROAD
City, State: LOS ANGELES, CA 90032
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)221-1746

Program Name: AMERICAN RECOVERY CENTER-DETOX Record ID: 190007IN Legal Name: BEHAVIORAL HEALTH SERVICES, INC. Service Type: DHS

Address: 2180 WEST VALLEY BOULEVARD, FLOOR 200 Resident Capacity: 0

City, State: POMONA, CA 91768 Total Occupancy: 0

Phone #: (909)865-2336

Program Name: PACIFICA HOUSE Record ID: 190007GN
Legal Name: BEHAVIORAL HEALTH SERVICES, INC. Service Type: RES

Address: 2501 WEST EL SEGUNDO BOULEVARD Resident Capacity: 68

City, State: HAWTHORNE, CA 90250 Total Occupancy: 68

Phone #: (323)754-2816

Program Name: BEIT T'SHUVAH
Legal Name: BEIT T'SHUVAH
Service Type: RES
Address: 8831 VENICE BOULEVARD
City, State: LOS ANGELES, CA 90034Total Occupancy: 98

Phone #: (310)204-5200

Program Name: BHC ALHAMBRA HOSPITAL Record ID: 190287AP Legal Name: BHC ALHAMBRA HOSPITAL, INC. Service Type: NON
Address: 4619 NORTH ROSEMEAD BOULEVARD Resident Capacity: 0
City, State: ROSEMEAD, CA 91770- Total Occupancy: 0

Phone #: (626)286-1191

Program Name: INSTITUTE FOR WOMEN'S HEALTH Record ID: 190285AN Legal Name: BIENVENIDOS CHILDREN'S CENTER, INC. Service Type: NON Address: 5257 EAST BEVERLY BOULEVARD Resident Capacity: 0 City, State: LOS ANGELES, CA 90022- Total Occupancy: 0

Phone #: (323)726-9777

Program Name: BLESSED DRUG AND ALCOHOL TREATMENT AND RESEARCH PROG Record ID: 190402AP Legal Name: BLESSED DRUG AND ALCOHOL TREATMENT AND RESEARCH PROG Service Type: NON Address: 1704 WEST MANCHESTER BOULEVARD, SUITE 103 Resident Capacity: 0 City, State: LOS ANGELES, CA 90047- Total Occupancy: 0

Phone #: (310)850-8037

Program Name: BRIDGE BACK LIMITED Record ID: 190231AP
Legal Name: BRIDGE BACK LIMITED, INC. Service Type: RES
Address: 1718, 1724, AND 1730 WEST VERNON AVENUE Resident Capacity: 108
City, State: LOS ANGELES, CA 90062- Total Occupancy: 108

Phone #: (323)299-8400

Los Angeles County As of: 04/06/2005

Program Name: INSPIRATION NONRESIDENTIAL PROGRAM Record ID: 190453AP Legal Name: C-CONRAD GROUP LIMITED Service Type: NON

Resident Capacity: 0 Address: 3741 WEST STOCKER STREET, SUITE 201 Total Occupancy: 0

City, State: LOS ANGELES, CA 90008-

Phone #: (310)645-5227

Program Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION Record ID: 190267CN Legal Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION Service Type: NON

Address: 819 WEST WHITTIER BOULEVARD, SUITE 200 Resident Capacity: 0

Total Occupancy: 0 City, State: MONTEBELLO, CA 90640-

Phone #: (714)633-0502

Program Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION Record ID: 190267AN

Service Type: NON Legal Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION

Resident Capacity: 0 Address: 13031 SAN ANTONIO DRIVE, SUITE 214 City, State: NORWALK, CA 90650-Total Occupancy: 0

Phone #: (714)633-0502

Program Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION Record ID: 190267EN

Service Type: NON Legal Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION

Address: 13666 HAWTHORNE BOULEVARD, SUITE 2 Resident Capacity: 0 Total Occupancy: 0 City, State: HAWTHORNE, CA 90250-

Phone #: (714)633-0502

Record ID: 190267DN Program Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION

Service Type: NON Legal Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION Resident Capacity: 0 Address: 7336 SOUTH PAINTER AVENUE

City, State: WHITTIER, CA 90602-Total Occupancy: 0

Phone #: (714)633-0502

Program Name: WALNUT STREET EDUCATION AND COUNSELING CENTER Record ID: 190199AN

Service Type: NON Legal Name: CALIFORNIA DRUG CONSULTANTS, INC. Address: 659 EAST WALNUT STREET Resident Capacity: 0 Total Occupancy: 0 City, State: PASADENA, CA 91101

Phone #: (626)844-0410

Record ID: 190396AP Program Name: CALIFORNIA DRUG TREATMENT PROGRAM, INC.

Legal Name: CALIFORNIA DRUG TREATMENT PROGRAM, INC. Service Type: NON Address: 2500 WILSHIRE BOULEVARD, SUITE 738 Resident Capacity: 0 Total Occupancy: 0 City, State: LOS ANGELES, CA 90057-

Phone #: (213)251-9930

Record ID: 190284AN Program Name: CALIFORNIA GRADUATE INSTITUTE COUNSELING CENTER SUBSTAL

Service Type: NON Legal Name: CALIFORNIA GRADUATE INSTITUTE Address: 1145 GAYLEY AVENUE, 3RD FLOOR Resident Capacity: 0

City, State: LOS ANGELES, CA 90024-Total Occupancy: 0

Phone #: (310)208-4240

As of: 04/06/2005 Los Angeles County

Program Name: MUJERES RECOVERY HOME Record ID: 190065AN

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABU Service Type: RES

Address: 530 NORTH AVENUE 54 Resident Capacity: 6
City, State: LOS ANGELES, CA 90042 Total Occupancy: 6

Phone #: (323)254-2423

Program Name: LATINOS RECOVERY HOME Record ID: 190065CN

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABU Service Type: RES

Address: 2436 WABASH AVENUE Resident Capacity: 6
City, State: LOS ANGELES, CA 90033 Total Occupancy: 6

Phone #: (323)780-8756

Program Name: LATINO FAMILY ALCOHOL AND DRUG SERVICES Record ID: 190065GN

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABU Service Type: NON

Address: 5801 EAST BEVERLY BOULEVARD Resident Capacity: 0
City, State: LOS ANGELES, CA 90022- Total Occupancy: 0

Phone #: (323)722-4529

Program Name: SAN GABRIEL LATINO FAMILY ALCOHOL AND DRUG SERVICES Record ID: 190065HN

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABU Service Type: NON

Address: 13020 FRANCISQUITO AVENUE, SUITE 20 Resident Capacity: 0
City, State: BALDWIN PARK, CA 91706- Total Occupancy: 0

Phone #: (626)813-0288

Program Name: LATINAS RECOVERY HOME Record ID: 190065EN

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABU Service Type: RES Address: 327 NORTH ST. LOUIS STREET Resident Capacity: 6
City, State: LOS ANGELES, CA 90063 Total Occupancy: 6

Phone #: (323)261-7810

Program Name: ENLIGHTENMENT CHEMICAL DEPENDENCY PROGRAM Record ID: 190444AN

Legal Name: CALIFORNIA INSTITUTE OF HEALTH AND SOCIAL SERVICES

Address: 1134 EAST IMPERIAL HIGHWAY

City, State: LOS ANGELES, CA 90059
Total Occupancy: 0

Phone #: (310)645-0625

Program Name: CALIFORNIA RECOVERY CENTER, INC. Record ID: 190370AP

Legal Name:CALIFORNIA RECOVERY CENTER, INC.Service Type:NONAddress:325 WEST COMPTON BOULEVARDResident Capacity:0City, State:COMPTON, CA 90220-Total Occupancy:0

Phone #: (310)638-7414

Program Name: CAMBODIAN ASSOCIATION OF AMERICA, COMMUNITY PREVENTIO Record ID: 190358AN

Legal Name:CAMBODIAN ASSOCIATION OF AMERICAService Type:NONAddress:2501 ATLANTIC AVENUEResident Capacity:0City, State:LONG BEACH, CA 90806-Total Occupancy:0

Phone #: (562)424-6105

As of: 04/06/2005 Los Angeles County

Program Name: BROWN SCAPULAR PROGRAM
Legal Name: CANON HUMAN SERVICES CENTERS, INC.
Address: 9705 SOUTH HOLMES AVENUE
City, State: LOS ANGELES, CA 90002
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)249-9097

Program Name: BROWN SCAPULAR PROGRAM
Legal Name: CANON HUMAN SERVICES CENTERS, INC.
Address: 9705 SOUTH HOLMES STREET
City, State: LOS ANGELES, CA 90002
Record ID: 190099EN
Service Type: RES
Resident Capacity: 32
Total Occupancy: 32

Phone #: (323)249-9097

Program Name: CARE MORE HEALTH SERVICES, INC.
Legal Name: CARE MORE HEALTH SERVICES INC.
Address: 1644 WILSHIRE BOULEVARD, SUITE 206
City, State: LOS ANGELES, CA 90017Record ID: 190374AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (213)273-4800

Program Name: CARING RESIDENTIAL CARE, INC.
Legal Name: CARING RESIDENTIAL CARE, INC.
Address: 4309-4311 LEIMERT BOULEVARD
City, State: LOS ANGELES, CA 90008Resident Capacity: 0
Total Occupancy: 0

Phone #: (562)434-4117

Program Name: CASA DE LAS AMIGAS Record ID: 190012AN Legal Name: CASA DE LAS AMIGAS Service Type: RES

Address: 160 NORTH EL MOLINO AVENUE AND 173 NORTH OAK KNOLL A Resident Capacity: 36

City, State: PASADENA, CA 91101 Total Occupancy: 38

Phone #: (626)792-2770

Program Name:A CASA DE LAS AMIGASRecord ID:190012BNLegal Name:CASA DE LAS AMIGASService Type:NONAddress:173 NORTH OAK KNOLL AVENUEResident Capacity:0City, State:PASADENA, CA 91101-Total Occupancy:0

Phone #: (626)792-2770

Program Name: SHARE UNIT OXFORD AVENUE HOUSE Record ID: 190256AN Legal Name: CEN-MAX PROPERTIES, INC., D.B.A., SHARE UNIT Service Type: RES

Address: 1628 NORTH OXFORD AVENUE AND 1643 SINALOA
City, State: PASADENA, CA 91104- Total Occupancy: 40

Phone #: (626)797-8377

Program Name: CENTER FOR INTEGRATED FAMILY AND HEALTH SERVICES THE FA Legal Name: CENTER FOR INTEGRATED FAMILY AND HEALTH SERVICES Service Type: NON Address: 540 SOUTH EREMLAND DRIVE, SUITES A-D Resident Capacity: 0

City, State: COVINA, CA 91723- Total Occupancy: 0

Phone #: (626)967-5103

As of: 04/06/2005 Los Angeles County

Program Name: CHABAD RESIDENTIAL TREATMENT CENTER

Legal Name: CHABAD OF CALIFORNIA

Address: 5675 WIST OF YMPIC BOLH EVARD.

Record ID: 190087CN

Service Type: RES

Address: 5675 WEST OLYMPIC BOULEVARD Resident Capacity: 44
City, State: LOS ANGELES, CA 90036- Total Occupancy: 44

Phone #: (310)208-7511

Program Name: KING DREW PLACE OF FAMILY
Legal Name: CHARLES R. DREW UNIVERSITY OF MEDICINE AND SCIENCE
Address: 9307 SOUTH CENTRAL AVENUE
City, State: LOS ANGELES, CA 90002
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)564-6982

Program Name: TRANSITION HOUSE Record ID: 190251AN

Legal Name: CHURCH OF GOD IN CHRIST, STATE OF SOUTHERN CALIFORNIA, LO Service Type: RES
Address: 404 NORTH ROSE STREET Resident Capacity: 10
City, State: COMPTON, CA 90221- Total Occupancy: 10

Phone #: (310)764-4400

Program Name: CIRCLE OF FRIENDS OUTPATIENT SERVICES, INC.
Legal Name: CIRCLE OF FRIENDS OUTPATIENT SERVICES, INC.
Address: 715 N. RIDGEWOOD PLACE
City, State: LOS ANGELES, CA 90038
Record ID: 190272AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)465-5888

Program Name: CITY OF COMPTON SPECIAL SERVICES CENTER
Legal Name: CITY OF COMPTON
Address: 404 NORTH ALAMEDA STREET
City, State: COMPTON, CA 90221Record ID: 190335AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (310)605-5693

Program Name: CITY OF LONG BEACH ALCOHOL & DRUG REHABILITATION Record ID: 190030AN

Legal Name:CITY OF LONG BEACHService Type:NONAddress:2525 GRAND AVENUEResident Capacity:0City, State:LONG BEACH, CA 90815-Total Occupancy:0

Phone #: (562)570-4102

Program Name: CITY OF LONG BEACH, ALCOHOL AND DRUG REHABILITATION Record ID: 190030CN

Legal Name:CITY OF LONG BEACH, MUNICIPALITYService Type:NONAddress:1133 EAST RHEA STREETResident Capacity:0City, State:LONG BEACH, CA 90806-Total Occupancy:0

Phone #: (562)570-4440

Program Name: CITY OF LONG BEACH, ALCOHOL AND DRUG REHABILITATION Record ID: 190030BN

Legal Name:CITY OF LONG BEACH-MUNICIPALITYService Type:NONAddress:6335 MYRTLE AVENUEResident Capacity:0City, State:LONG BEACH, CA 90805-Total Occupancy:0

Phone #: (562)570-4540

As of: 04/06/2005 Los Angeles County

Program Name: CITY OF PASADENA RECOVERY CENTER Record ID: 190041AN Legal Name: CITY OF PASADENA PUBLIC HEALTH DEPARTMENT Service Type: NON Address: 1845 NORTH FAIR OAKS AVENUE Resident Capacity: 0

Address: 1845 NORTH FAIR OAKS AVENUE Resident Capacity: 0
City, State: PASADENA, CA 91103
Total Occupancy: 0

Phone #: (626)744-6001

Program Name: CIVIGENICS, INC., LONG BEACH FACILITY Record ID: 190400AP

Legal Name:CIVIGENICS, INC.Service Type:RESAddress:2233 EAST 69TH STREETResident Capacity:112City, State:LONG BEACH, CA 90805-Total Occupancy:112

Phone #: (562)663-0710

Program Name:MEN'S RECOVERY HOMERecord ID:190016ANLegal Name:CLARE FOUNDATION, INC.Service Type:RESAddress:1871 NINTH STREETResident Capacity:58

Address: 1871 NINTH STREET Resident Capacity: 58
City, State: SANTA MONICA, CA 90404
Total Occupancy: 58

Phone #: (310)314-6238

Program Name: CLARE FOUNDATION INTENSIVE OUTPATIENT PROGRAM Record ID: 190016HN

Legal Name:CLARE FOUNDATION, INC.Service Type:NONAddress:1020 PICO BOULEVARDResident Capacity:0City, State:SANTA MONICA, CA 90405-Total Occupancy:0

Phone #: (310)452-5578

Program Name: SANTA MONICA RECOVERY CENTER Record ID: 190016BN Legal Name: CLARE FOUNDATION, INC. Service Type: RES-DETOX

Address: 905 AND 907 PICO BOULEVARD Resident Capacity: 31
City, State: SANTA MONICA, CA 90405 Total Occupancy: 31

Phone #: (310)314-6250

Program Name: WOMEN'S RECOVERY HOME
Legal Name: CLARE FOUNDATION, INC.
Address: 1023-1031 PICO BOULEVARD
City, State: SANTA MONICA, CA 90405
Record ID: 190016FN
Service Type: RES
Resident Capacity: 14
Total Occupancy: 14

Phone #: (310)450-4184

Program Name: CLEARVIEW TREATMENT PROGRAMS Record ID: 190438BP

Legal Name:CLEARVIEW CENTERS LLCService Type:RESAddress:2432 1/2 WALNUT AVENUEResident Capacity:3City, State:VENICE, CA 90291-Total Occupancy:3

Phone #: (310)446-0110

Program Name: CLEARVIEW TREATMENT PROGRAM

Record ID: 190438AP

Legal Name:CLEARVIEW CENTERS LLCService Type:RESAddress:2432 WALNUT AVENUEResident Capacity:6City, State:VENICE, CA 90291-Total Occupancy:6

Phone #: (310)446-0110

As of: 04/06/2005 Los Angeles County

Program Name: CLINICA MONSENOR OSCAR A. ROMERO
Legal Name: CLINICA MSR. OSCAR A. ROMERO
Address: 2032 MARENGO STREET
City, State: LOS ANGELES, CA 90033Record ID: 190368AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)780-6336

Program Name: CREATIVE CARE - MALIBU Record ID: 190226AP
Legal Name: CREATIVE CARE, INC. Service Type: RES-DETOX

Address: 5927 TRANCAS CANYON ROAD Resident Capacity: 6
City, State: MALIBU, CA 90265- Total Occupancy: 6

Phone #: (310)589-9834

Program Name: CREATIVE CARE
Legal Name: CREATIVE CARE, INC.
Record ID: 190226BP
Service Type: RES-DETOX

Address: 5909 TRANCAS CANYON ROAD Resident Capacity: 6
City, State: MALIBU, CA 90265- Total Occupancy: 6

Phone #: (310)589-9834

Program Name: CREATIVE CARE
Legal Name: CREATIVE CARE, INC.
Record ID: 190226DP
Service Type: RES

Address: 5947 TRANCAS CANYON ROAD

City, State: MALIBU, CA 90265
Total Occupancy: 6

Phone #: (310)589-9834

Program Name: CREATIVE CARE Record ID: 190226CP

Legal Name: CREATIVE CARE, INCORPORATED Service Type: RES-DETOX

Address: 5941 TRANCAS CANYON Resident Capacity: 6
City, State: MALIBU, CA 90265- Total Occupancy: 6

Phone #: (310)589-9834

Program Name: CRI-HELP Record ID: 190095AN Legal Name: CRI-HELP, INC. Service Type: RES-DETOX

Address: 11027 BURBANK BOULEVARD Resident Capacity: 135 City, State: NORTH HOLLYWOOD, CA 91601 Total Occupancy: 135

Phone #: (818)985-8323

Program Name: SOCORRO Record ID: 190095NN Legal Name: CRI-HELP, INC. Service Type: NON

Address: 4966 SOUTH HUNTINGTON DRIVE Resident Capacity: 0
City, State: LOS ANGELES, CA 90032- Total Occupancy: 0

Phone #: (323)343-9530

Program Name: SOCORRO Record ID: 190095MN Legal Name: CRI-HELP, INC. Service Type: RES

Address: 2010 NORTH LINCOLN PARK AVENUE Resident Capacity: 78
City, State: LINCOLN HEIGHTS, CA 90031- Total Occupancy: 78

Phone #: (323)222-1440

As of: 04/06/2005 Los Angeles County

Program Name: CRI-HELP - OUTPATIENT Record ID: 190095KN Legal Name: CRI-HELP, INC. Service Type: NON
Address: 8330 LANKERSHIM BOULEVARD Resident Capacity: 0
City, State: NORTH HOLLYWOOD, CA 91605- Total Occupancy: 0

Phone #: (818)985-8323

Program Name: CROSSROADS Record ID: 190205AN Legal Name: CROSSROADS, INCORPORATED Service Type: RES

Address: 1269 NORTH HARVARD AVENUE Resident Capacity: 6

City, State: CLAREMONT, CA 91711 Total Occupancy: 7

Phone #: (909)397-0103

Program Name: CROSSROADS, INC
Legal Name: CROSSROADS, INCORPORATED
Address: 585 SAN FRANCISCO
City, State: POMONA, CA 91767Record ID: 190205BN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7

Phone #: (909)397-0103

Program Name: LAWS SUPPORT CENTER
Legal Name: DANNY LAWS
Address: 2707 WEST 54TH STREET
City, State: LOS ANGELES, CA 90043Record ID: 190423AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)733-5315

Program Name: DARE U TO CARE
Legal Name: DARE U TO CARE OUTREACH MINISTRY
Address: 316 WEST 120TH STREET
City, State: LOS ANGELES, CA 90061
Record ID: 190182AN
Service Type: RES
Resident Capacity: 23
Total Occupancy: 23

Phone #: (323)756-3208

Program Name: DARE U TO CARE OUTREACH MINISTRY
Legal Name: DARE U TO CARE OUTREACH MINISTRY
Address: 14325 SOUTH FIGUEROA STREET
City, State: LOS ANGELES, CA 90248Record ID: 190182DN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (310)515-5039

Program Name: HEALTH CARE DUAL DIANGOSIS CLINICS 11 Record ID: 190413AP Legal Name: DEVELOPMENT SPECIALITY PROJECTS, INC. D.B.A., HEALTH CARE I Service Type: NON

Address: 1773 EAST CENTURY BOULEVARD Resident Capacity: 0
City, State: LOS ANGELES, CA 90002- Total Occupancy: 0

Phone #: (559)352-1185

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 190419BP Legal Name: DEVELOPMENT SPECIALTY PROJECT, INC. Service Type: NON Address: 151 NORTH GREVILLEA AVENUE Resident Capacity: 0 City, State: INGLEWOOD, CA 90303- Total Occupancy: 0

Phone #: (559)352-1185

As of: 04/06/2005 Los Angeles County

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 190419FP Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC. Service Type: NON Address: 1415 NORTH TIEJERA BOULEVARD Resident Capacity: 0 City, State: INGLEWOOD, CA 90302- Total Occupancy: 0

Phone #: (559)352-1185

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II
Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC.
Address: 9330 SOUTH EIGHTH AVENUE
City, State: INGLEWOOD, CA 90305Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)352-1185

Program Name:HEALTH CARE DUAL DIAGNOSIS CLINICS IIRecord ID:190419IPLegal Name:DEVELOPMENT SPECIALTY PROJECTS, INC.Service Type:NONAddress:155 WEST KELSO STREETResident Capacity:0

Total Occupancy: 0

Phone #: (559)352-1185

City, State: INGLEWOOD, CA 90301-

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 190419EP Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC. Service Type: NON Address: 10711 10TH AVENUE Resident Capacity: 0
City, State: INGLEWOOD, CA 90303- Total Occupancy: 0

Phone #: (559)352-1185

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 190425CP Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC. Service Type: NON Address: 5213 WEST PICO BOULEVARD Resident Capacity: 0 City, State: LOS ANGELES, CA 90019- Total Occupancy: 0

Phone #: (559)352-1185

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 190419JP Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC. Service Type: NON
Address: 15342 SOUTH HAWTHORNE BOULEVARD Resident Capacity: 0
City, State: LAWNDALE, CA 90250- Total Occupancy: 0

Phone #: (559)352-1185

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 190419CP
Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC. Service Type: NON
Address: 10500 YUKON AVENUE Resident Capacity: 0
City, State: INGLEWOOD, CA 90305- Total Occupancy: 0

Phone #: (559)352-1185

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 190419AP
Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC.

Address: 5354 WEST 64TH STREET
City, State: INGLEWOOD, CA 90302Total Occupancy: 0

Phone #: (559)352-1185

As of: 04/06/2005 Los Angeles County

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 190419DP Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC. Service Type: NON Address: 231 SOUTH GREVILLEA AVENUE Resident Capacity: 0 City, State: INGLEWOOD, CA 90301- Total Occupancy: 0

Phone #: (559)352-1185

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II
Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC.
Address: 441 WEST HILLCREST BOULEVARD
City, State: INGLEWOOD, CA 90301Record ID: 190419GP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)352-1185

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 190425AP Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC., D.B.A. HEALTH CARE D Service Type: NON Address: 7706 SOUTH CENTRAL Resident Capacity: 0 City, State: LOS ANGELES, CA 90001- Total Occupancy: 0

Phone #: (559)352-1185

Program Name: VIA AVANTA Record ID: 190092AN Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE Service Type: RES

Address: 11643 GLENOAKS BOULEVARD Resident Capacity: 70

City, State: PACOIMA, CA 91331 Total Occupancy: 70

Phone #: (818)897-2609

Program Name: DIDI HIRSCH OUTPATIENT DRUG ABUSE SERVICES
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE
Address: 4760 SOUTH SEPULVEDA BOULEVARD
City, State: CULVER CITY, CA 90230
Record ID: 190092BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (310)306-2944

Program Name: DO IT NOW FOUNDATION OF SOUTHERN CALIFORNIA, INC.
Legal Name: DO IT NOW FOUNDATION OF SOUTHERN CALIFORNIA, INC.
Address: 7060 HOLLYWOOD BOULEVARD, SUITE 201
City, State: HOLLYWOOD, CA 90028-6015
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)465-3784

Program Name: DOCTOR'S HOSPITAL OF WEST COVINA DUAL DIAGNOSIS TREATME Record ID: 190360AP Legal Name: DOCTOR'S HOSPITAL OF WEST COVINA, INC. Service Type: NON Address: 725 SOUTH ORANGE AVENUE, 3RD FLOOR Resident Capacity: 0 City, State: WEST COVINA, CA 91790- Total Occupancy: 0

Phone #: (626)338-0502

Program Name: AM/PM CULVER CITY BUDGET SCHOOL - ESCUELA LATINA
Legal Name: DRIVER SAFETY SCHOOLS, INC.
Address: 4240 OVERLAND AVENUE
City, State: CULVER CITY, CA 90230Resident Capacity: 0
Total Occupancy: 0

Phone #: (310)837-1818

As of: 04/06/2005 Los Angeles County

Program Name: AM/PM VAN NUYS BUDGET SCHOOL - ESCUELA LATINA
Legal Name: DRIVER SAFETY SCHOOLS, INC.
Address: 6316 VAN NUYS BOULEVARD
City, State: VAN NUYS, CA 91401
Record ID: 190294AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (818)787-7878

Program Name: THE EAST LOS ANGELES HEALTH TASK FORCE Record ID: 190017BN Legal Name: EAST LOS ANGELES HEALTH TASK FORCE Service Type: NON

Address: 630 SOUTH ST. LOUIS STREET Resident Capacity: 0

City, State: LOS ANGELES, CA 90023-1224 Total Occupancy: 0

Phone #: (323)881-1110

Program Name: THE EAST LOS ANGELES HEALTH TASK FORCE Record ID: 190017AN
Legal Name: EAST LOS ANGELES HEALTH TASK FORCE Service Type: RES-DETOX

Address: 630 SOUTH ST. LOUIS STREET Resident Capacity: 73
City, State: LOS ANGELES, CA 90023 Total Occupancy: 73

Phone #: (323)261-2171

Program Name: EATON CANYON RECOVERY SYSTEM - RESIDENTIAL TREATMENT
Legal Name: EATON CANYON FOUNDATION
Address: 3323 EAST FAIRPOINTE STREET
City, State: PASADENA, CA 91107Record ID: 190258BN
Service Type: RES
Resident Capacity: 12

Phone #: (626)798-0150

Program Name: DAY TREATMENT AND OUTPATIENT ALCOHOL AND/OR OTHER DRU Record ID: 190236BN Legal Name: EL PROYECTO DEL BARRIO Service Type: NON
Address: 9140 VAN NUYS BOULEVARD, SUITES 104-107, 201, 203, AND 208 Resident Capacity: 0
City, State: PANORAMA CITY, CA 91402- Total Occupancy: 0

Phone #: (818)895-2206

Program Name: ELDERCARE REHABILITATION TREATMENT PROGRAM
Legal Name: ELDERCARE INCLUSIVE FOUNDATION
Address: 8105 FALLBROOK AVENUE
City, State: WEST HILLS, CA 91304Record ID: 190322AN
Service Type: DSS
Resident Capacity: 0
Total Occupancy: 0

Phone #: (818)348-9265

Program Name: AMITY FOUNDATION Record ID: 190259AN Legal Name: EPIDAURUS Service Type: RES

Address: 3745 S. GRAND AVENUE, VARIOUS ROOMS (LISTED BELOW) Resident Capacity: 141

City, State: LOS ANGELES, CA 90007- Total Occupancy: 141

Phone #: (559)783-2813

Program Name: FAMILY COUNSELING SERVICES WEST SAN GABRIEL VALLEY Record ID: 190417AN Legal Name: FAMILY COUNSELING SERVICES OF THE WEST SAN GABRIEL VALLI Service Type: NON Address: 10642 LOWER AZUSA ROAD Resident Capacity: 0 City, State: EL MONTE, CA 91731- Total Occupancy: 0

Phone #: (626)350-4400

As of: 04/06/2005 Los Angeles County

Program Name: FAMILY SERVICE OF LONG BEACH
Legal Name: FAMILY SERVICE OF LONG BEACH
Address: 1043 PINE AVENUE
City, State: LONG BEACH, CA 90813
Record ID: 190275BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (562)436-9893

Program Name:FAMILY SERVICE OF LONG BEACHRecord ID:190275ANLegal Name:FAMILY SERVICE OF LONG BEACHService Type:NONAddress:16704 CLARK STREETResident Capacity:0

Total Occupancy: 0

Phone #: (562)436-9893

City, State: BELLFLOWER, CA 90706-

Program Name: FIRST TO SERVE Record ID: 190342AN Legal Name: FIRST TO SERVE Service Type: RES

Address: 1017 WEST 50TH STREET Resident Capacity: 16

City, State: LOS ANGELES, CA 90037- Total Occupancy: 18

Phone #: (323)758-4670

Program Name: F.O.U.N.D., INC. Record ID: 190279BP

Legal Name:FORMING OPPORTUNITIES UNDER NEW DIRECTIONService Type:NONAddress:830 SOUTH OLIVE STREETResident Capacity:0City, State:LOS ANGELES, CA 90014-Total Occupancy:0

Phone #: (213)683-9964

Program Name: FOUND, INC.

Legal Name: FOUND, INC.

Address: 1730 SOUTH VERMONT AVENUE

Record ID: 190279AP

Service Type: NON

Resident Capacity: 0

Address: 1730 SOUTH VERMONT AVENUE Resident Capacity: 0
City, State: LOS ANGELES, CA 90006- Total Occupancy: 0

Phone #: (323)730-9497

Program Name:FRED BROWN RECOVERY SERVICESRecord ID:190135LNLegal Name:FRED BROWN RECOVERY SERVICESService Type:RESAddress:356 WEST 13TH STREETResident Capacity:6City, State:SAN PEDRO, CA 90731-Total Occupancy:6

Phone #: (310)519-8723

Program Name: FRED BROWN'S RECOVERY SERVICES Record ID: 190135BN Legal Name: FRED BROWN'S RECOVERY SERVICES, INC. Service Type: RES

Address: 329 218TH STREET

City, State: CARSON, CA 90745

Resident Capacity: 7

Total Occupancy: 7

Phone #: (310)782-7175

Program Name: FRED BROWN'S RECOVERY SERVICES Record ID: 190135JN Legal Name: FRED BROWN'S RECOVERY SERVICES, INC. Service Type: RES

Address: 276 WEST 14TH STREET

City, State: SAN PEDRO, CA 90731
Total Occupancy: 4

Phone #: (310)519-8723

As of: 04/06/2005 Los Angeles County

Program Name: FRED BROWN'S RECOVERY SERVICES Record ID: 190135IN Legal Name: FRED BROWN'S RECOVERY SERVICES, INC. Service Type: RES

Address: 278 WEST 14TH STREET Resident Capacity: 6

City, State: SAN PEDRO, CA 90731- Total Occupancy: 6

Phone #: (310)519-8723

Program Name: FRED BROWN'S RECOVERY SERVICES Record ID: 190135EN
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.

Address: 856 WEST 19TH STREET
City, State: SAN PEDRO, CA 90731

Record ID: 190135EN
Service Type: RES
Total Occupancy: 12

Phone #: (310)548-1196

Program Name: FRED BROWN'S RECOVERY SERVICES Record ID: 190135CN Legal Name: FRED BROWN'S RECOVERY SERVICES, INC. Service Type: RES

Address: 270 WEST 14TH STREET Resident Capacity: 14

City, State: SAN PEDRO, CA 90731 Total Occupancy: 14

Phone #: (310)519-8723

Program Name: GENESIS PROGRAMS, INC. Record ID: 190233CP
Legal Name: GENESIS PROGRAMS, INC. Service Type: NON
Address: 25129 THE OLD ROAD, SUITE 207
City, State: STEVENSON RANCH, CA 91381- Total Occupancy: 0

Phone #: (661)260-3078

Program Name:GENESIS PROGRAMS, INC.Record ID:190233DPLegal Name:GENESIS PROGRAMS, INC.Service Type:NONAddress:6167 BRISTOL PARKWAY, SUITE 260Resident Capacity:0City, State:CULVER CITY, CA 90230-Total Occupancy:0

Phone #: (310)641-8755

Program Name: ALTERNATIVE OPTIONS COUNSELING CENTER Record ID: 190340AN Legal Name: GEORGE BERNIER, PH.D. Service Type: NON Address: 12510 EAST SOUTH STREET Resident Capacity: 0
City, State: CERRITOS, CA 90703- Total Occupancy: 0

Phone #: (562)860-0985

Program Name: GLENDALE ADVENTIST ALCOHOL AND DRUG SERVICES Record ID: 190082BN
Legal Name: GLENDALE ADVENTIST MEDICAL CENTER Service Type: RES-DETOX

Address: 335 MISSION ROAD Resident Capacity: 24
City, State: GLENDALE, CA 91205- Total Occupancy: 24

Phone #: (818)242-3116

Program Name: GLOBAL FOUNDATIONS (ALCOHOL AND DRUG PROGRAM COUNSEL Record ID: 190421AN Legal Name: GLOBAL FOUNDATIONS DRUG AND ALCOHOL COUNSELING CENTE Service Type: NON Address: 3545 WILSHIRE BOULEVARD, SUITE 355 Resident Capacity: 0 City, State: LOS ANGELES, CA 90010- Total Occupancy: 0

Phone #: (213)383-5443

As of: 04/06/2005

Los Angeles County

Program Name: SYLMAR HEALTH AND REHABILITATION Record ID: 190427AP Legal Name: GOLDEN STATE HEALTH CENTERS, INC. Service Type: RES Resident Capacity: 0 Address: 12220 FOOTHILL BOULEVARD Total Occupancy: 0 City, State: SYLMAR, CA 91342-Phone #: (818)834-5082 Program Name: GRANDVIEW FOUNDATION, INC. Record ID: 190022EN Legal Name: GRANDVIEW FOUNDATION, INC. Service Type: NON Resident Capacity: 0 Address: 1230 NORTH MARENGO AVENUE Total Occupancy: 0 City, State: PASADENA, CA 91103-Phone #: (626)797-1124 Program Name: MARENGO FACILITY Record ID: 190022AN Service Type: RES Legal Name: GRANDVIEW FOUNDATION, INC. Resident Capacity: 16 Address: 1230 NORTH MARENGO AVENUE City, State: PASADENA, CA 91103 Total Occupancy: 16 Phone #: (626)797-1124 Program Name: GRANDVIEW HOUSE Record ID: 190022BN Service Type: RES Legal Name: GRANDVIEW FOUNDATION, INC. Address: 225 GRANDVIEW STREET Resident Capacity: 22 Total Occupancy: 24 City, State: PASADENA, CA 91104 Phone #: (626)797-1124

Program Name:GRANDVIEW FOUNDATION, INC.Record ID:190022CNLegal Name:GRANDVIEW FOUNDATION, INC.Service Type:RESAddress:126 NORTH AVENUE 57Resident Capacity:12City, State:LOS ANGELES, CA 90042-Total Occupancy:12

Phone #: (626)797-1124

Program Name: GRANDVIEW FOUNDATION, INC.
Legal Name: GRANDVIEW FOUNDATION, INC.
Address: 126 NORTH AVENUE 57
City, State: LOS ANGELES, CA 90042Record ID: 190022DN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (626)797-1124

Program Name: PASSAGES Record ID: 190283AP
Legal Name: GRASSHOPPER HOUSE LLC Service Type: RES-DETOX

Address: 6428 MEADOWS COURT Resident Capacity: 6
City, State: MALIBU, CA 90265- Total Occupancy: 24

Phone #: (310)392-9393

Program Name: PASSAGES B Record ID: 190283BP
Legal Name: GRASSHOPPER HOUSE, LLC Service Type: RES

Legal Name:GRASSHOPPER HOUSE, LLCService Type:RESAddress:6428 - B MEADOWS COURTResident Capacity:6City, State:MALIBU, CA 90265-Total Occupancy:10

Phone #: (310)589-2880

As of: 04/06/2005 Los Angeles County

Program Name: GUIDANCE HEALTH SERVICES, INC.
Legal Name: GUIDANCE HEALTH SERVICES, INC.
Address: 11633 HAWTHORNE BOULEVARD, SUITE 210
City, State: HAWTHORNE, CA 90250Total Occupancy: 0

Phone #: (310)978-0461

Program Name: HARMONY PLACE Record ID: 190336AP
Legal Name: HARMONY PLACE, INC. Service Type: RES-DETOX

Address: 6415 BUSCH DRIVE Resident Capacity: 6
City, State: MALIBU, CA 90265Total Occupancy: 6

Phone #: (310)457-9674

Program Name: HAVEN HOUSE Record ID: 190024AN Legal Name: HAVEN HOUSE, INC. Service Type: RES

Address: P.O. BOX 50007 Resident Capacity: 6

City, State: PASADENA, CA 91115-0007 Total Occupancy: 36

Phone #: (626)564-8880

Program Name: HEALTHCARE SERVICES, INC.--EL MONTE
Legal Name: HEALTHCARE SERVICES, INC.
Address: 3441 NORTH GILLMAN AVENUE, UNIT A
City, State: EL MONTE, CA 91732
Record ID: 190411AP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (626)444-2918

Program Name: HEALTHCARE SERVICES, INC.--ALVARADO STREET Record ID: 190411BP Legal Name: HEALTHCARE SERVICES, INC. Service Type: NON
Address: 1231 SOUTH ALVARADO STREET Resident Capacity: 25
City, State: LOS ANGELES, CA 90006- Total Occupancy: 25

Phone #: (213)386-5131

Program Name: THE LIGHTHOUSE EL MONTE Record ID: 190382AP Legal Name: HEALTHCARE SERVICES, INC. Service Type: NON Address: 4900 SANTA ANITA AVENUE, 2-B Resident Capacity: 0 City, State: EL MONTE, CA 91732- Total Occupancy: 0

Phone #: (626)444-2919

Program Name: HELP THE PEOPLE FOUNDATION
Legal Name: HELP THE PEOPLE FOUNDATION
Address: 3850 WEST MARTIN LUTHER KING, JR. BOULEVARD, SUITE 209
City, State: LOS ANGELES, CA 90008Total Occupancy: 0

Phone #: (310)674-1120

Program Name: HELPLINE YOUTH COUNSELING, INC.
Legal Name: HELPLINE YOUTH COUNSELING, INC.
Address: 11849 FIRESTONE BOULEVARD
City, State: NORWALK, CA 90650
Record ID: 190386AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (562)864-3722

As of: 04/06/2005 Los Angeles County

Program Name: HIGHER GOALS
Legal Name: HIGHER GOALS, INC.
Address: 10510 SOUTH VERMONT AVENUE
City, State: LOS ANGELES, CA 90044
Record ID: 190200AN
Service Type: RES
Resident Capacity: 16

Phone #: (323)755-9702

Program Name: HIS SHELTERING ARMS Record ID: 190064AN Legal Name: HIS SHELTERING ARMS, INC. Service Type: RES

Address: 10615 SOUTH AVALON Resident Capacity: 21

City, State: LOS ANGELES, CA 90003 Total Occupancy: 21

Phone #: (323)755-6646

Program Name: HIS SHELTERING ARMS FAMILY SERVICES CENTER
Legal Name: HIS SHELTERING ARMS, INC.

Address: 112 WEST 111TH STREET AND 11101 SOUTH MAIN STREET
Resident Capacity: 55

Address: 112 WEST 111TH STREET AND 11101 SOUTH MAIN STREET

City, State: LOS ANGELES, CA 90061

Resident Capacity: 55

Total Occupancy: 69

Phone #: (323)755-6646

Program Name: HIS SHELTERING ARMS, INC.
Legal Name: HIS SHELTERING ARMS, INC.
Address: 11101 SOUTH MAIN STREET
City, State: LOS ANGELES, CA 90061Record ID: 190064CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)755-6646

Program Name: HHCLA DRUG TREATMENT PROGRAM
Legal Name: HOMELESS HEALTH CARE LOS ANGELES
Address: 2330 BEVERLY BOULEVARD
City, State: LOS ANGELES, CA 90057Record ID: 190246AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (213)744-0724

Program Name: HOUSE OF HOPE Record ID: 190025AN Legal Name: HOUSE OF HOPE FOUNDATION, INC. Service Type: RES

Address: SEE BELOW FOR CURRENT ADDRESSES Resident Capacity: 50

City, State: SAN PEDRO, CA 90731 Total Occupancy: 51

Phone #: (310)831-9411

Program Name: HOUSE OF HOPE FOUNDATION, INC.

Legal Name: HOUSE OF HOPE FOUNDATION, INC.

Address: 205 WEST NINTH STREET

City, State: SAN PEDRO, CA 90731
Record ID: 190025GN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (310)521-9209

Program Name: I-ADARP, (INTER-AGENCY DRUG ABUSE RECOVERY PROGRAM) Record ID: 190321AN

Legal Name:I-ADARPService Type:NONAddress:6740 KESTER AVENUE, SUITE 200Resident Capacity:0City, State:VAN NUYS, CA 91405-Total Occupancy:0

Phone #: (818)994-7454

As of: 04/06/2005 Los Angeles County

Program Name: INDEPENDENCE COMMUNITY TREATMENT CLINIC
Legal Name: INDEPENDENCE COMMUNITY TREATMENT CLINIC
Address: 19231 VICTORY BOULEVARD, SUITE 554
City, State: RESEDA, CA 91335Total Occupancy: 0

Phone #: (818)776-1755

Program Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES
Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES
Address: 375 SOUTH MAIN STREET, SUITE 111
City, State: POMONA, CA 91766Record ID: 190378AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

City, State: POMONA, CA 91766-Phone #: (909)932-1069

Program Name: INSIGHT Record ID: 190407CP
Legal Name: INSIGHT BEHAVIORAL HEALTHCARE, INC. Service Type: NON
Address: 1511 PONTIUS STREET, SUITE 104 Resident Capacity: 0
City, State: WEST LOS ANGELES, CA 90064- Total Occupancy: 0

Phone #: (310)000-0000

Program Name: INSIGHT Record ID: 190407BP
Legal Name: INSIGHT BEHAVIORAL HEALTHCARE, INC.

Address: 1155 EAST GREEN STREET
City, State: PASADENA, CA 91106Record ID: 190407BP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (626)564-2703

Program Name: INSIGHT Record ID: 190407AP
Legal Name: INSIGHT BEHAVIORAL HEALTHCARE, INC. Service Type: NON
Address: 4495 VAN NUYS BOULEVARD Resident Capacity: 0
City, State: SHERMAN OAKS, CA 91403- Total Occupancy: 0

Phone #: (818)501-3512

Program Name: GRAND AVENUE CENTER OF DIGNITY - NONRESIDENTIAL PROGRA Record ID: 190383BN Legal Name: INTERCONNECTION CENTER Service Type: NON Address: 3833 SOUTH GRAND AVENUE Resident Capacity: 0
City, State: LOS ANGELES, CA 90037- Total Occupancy: 0

Phone #: (213)747-4624

Program Name: GRAND AVENUE CENTER FOR DIGNITY - RESIDENTIAL PROGRAM Record ID: 190383AN

Legal Name:INTERCONNECTION CENTERService Type:RESAddress:3833 SOUTH GRAND AVENUEResident Capacity:16City, State:LOS ANGELES, CA 90037-Total Occupancy:26

Phone #: (213)747-4624

Program Name: JEWISH FAMILY SERVICE OF LOS ANGELES, ALCOHOL DRUG ACTIO Record ID: 190072BN

Legal Name:JEWISH FAMILY SERVICE OF LOS ANGELESService Type:NONAddress:8838 WEST PICO BOULEVARDResident Capacity:0City, State:LOS ANGELES, CA 90035-Total Occupancy:0

Phone #: (310)247-1180

As of: 04/06/2005 Los Angeles County

Program Name: JJAK PSYCHOTHERAPY SERVICES, INC.
Legal Name: JJAK PSYCHOTHERAPY SERVICES, INC.
Address: 2001 NORTH GAREY AVENUE, SUITE 107
City, State: POMONA, CA 91767Record ID: 190314BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)622-2121

Program Name: JOINT EFFORTS NONRESIDENTIAL ALCOHOL AND/OR OTHER DRUG
Legal Name: JOINT EFFORTS, INC.

Address: 505 SOUTH PACIFIC AVENUE, SUITE 205
City, State: SAN PEDRO, CA 90731
Record ID: 190291AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (310)831-2358

Program Name: KIM'S DRIVING SCHOOL
Legal Name: KIM, EMANUEL
Address: 3306 VENICE BOULEVARD
City, State: LOS ANGELES, CA 90019Record ID: 190307AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)731-0833

Program Name: KINGS CARE - A SAFE PLACE, INC.

Legal Name: KINGS CARE - A SAFE PLACE, INC.

Address: 40614 11TH STREET WEST

City, State: PALMDALE, CA 93551
Record ID: 190436AN
Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (661)273-2600

Program Name: SECOND CHANCE RECOVERY SERVICES Record ID: 190277BP
Legal Name: KIRBY PALMER Service Type: NON
Address: 250 WEST FIRST STREET, SUITE 242 Resident Capacity: 0
City, State: CLAREMONT, CA 91711- Total Occupancy: 0

Phone #: (909)621-9023

Program Name: LA CLINICA DEL PUEBLO Record ID: 190109BN Legal Name: LA CLINICA DEL PUEBLO, INC. Service Type: NON
Address: 1547 NORTH AVALON BOULEVARD Resident Capacity: 0
City, State: WILMINGTON, CA 90744- Total Occupancy: 0

Phone #: (310)830-0100

Program Name:LITTLE HOUSE, INC.Record ID:190029ANLegal Name:LITTLE HOUSE, INC.Service Type:RESAddress:9718 HARVARD STREETResident Capacity:28City, State:BELLFLOWER, CA 90706-3699Total Occupancy:34

Phone #: (562)925-2777

Program Name: LIVE AGAIN RECOVERY HOME - CAMP CISQUITO Record ID: 190079BN Legal Name: LIVE AGAIN MINISTRIES Service Type: RES

Address: 38215 NORTH SAN FRANCISQUITO CANYON ROAD
City, State: SAUGUS, CA 91350
Resident Capacity: 80
Total Occupancy: 80

Phone #: (661)270-0025

As of: 04/06/2005 Los Angeles County

Program Name: LIVE AGAIN RECOVERY HOMES
Legal Name: LIVE AGAIN MINISTRIES
Address: 45304 NEWTREE AVENUE
City, State: LANCASTER, CA 93534Record ID: 190079CN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (661)951-0180

Program Name: LIVE AGAIN RECOVERY HOMES
Legal Name: LIVE AGAIN MINISTRIES
Address: 45114 13TH STREET WEST
City, State: LANCASTER, CA 93534Record ID: 190079DN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)270-0025

Program Name: OUTPATIENT SERVICES Record ID: 190100EN
Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE Service Type: NON

Address: 333 SOUTH CENTRAL Resident Capacity: 0
City, State: LOS ANGELES, CA 90013 Total Occupancy: 0

Phone #: (213)626-6411

Program Name: FAMILY FOUNDATIONS PROGRAM Record ID: 190100KN

Legal Name:LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSEService Type:RESAddress:11121 BLOOMFIELD AVENUEResident Capacity:35City, State:SANTA FE SPRINGS, CA 90670-Total Occupancy:75

Phone #: (562)946-7675

Program Name: ALLEN HOUSE Record ID: 190100IN

Legal Name:LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSEService Type:RESAddress:10425 SOUTH PAINTER AVENUEResident Capacity:55City, State:SANTA FE SPRINGS, CA 90670Total Occupancy:57

Phone #: (562)906-2685

Program Name: OUTPATIENT FAMILY CENTER Record ID: 190100BN

Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE

Address: 11015 BLOOMFIELD AVENUE

City, State: SANTA FE SPRINGS, CA 90670-4601

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (562)906-2676

Program Name: ANTELOPE VALLEY REHABILITATION CENTER - ACTON Record ID: 190001AN

Legal Name:LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICESService Type:RESAddress:30500 ARRASTRE CANYON ROADResident Capacity:309City, State:ACTON, CA 93510Total Occupancy:309

Phone #: (661)269-0062

Program Name: ANTELOPE VALLEY REHABILITATION CENTER - WARM SPRINGS Record ID: 190001BN

 Legal Name:
 LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES
 Service Type:
 RES

 Address:
 38200 NORTH LAKE HUGHES ROAD
 Resident Capacity:
 199

City, State: CASTAIC, CA 91310 Total Occupancy: 199

Phone #: (661)257-2342

As of: 04/06/2005 Los Angeles County

Program Name: COMMUNITY FAMILY COUNSELING PROGRAMS
Legal Name: LOUIS N. HERNANDEZ
Address: 634 SOUTH SPRING STREET, SUITE 717
City, State: LOS ANGELES, CA 90014Phone #: (213)489-5225

Program Name: MACLAY REHABILITATION CORPORATION, INC.

Record ID: 190458AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0
Record ID: 190338AN

Program Name: MACLAY REHABILITATION CORPORATION, INC.

Legal Name: MACLAY REHABILITATION CORPORATION, INC.

Address: 13770 SAYRE STREET

City, State: SYLMAR, CA 91342
Phone #: (818)362-5615

Record ID: 190338AN
Record ID: 190338AN
Service Type: RES

Resident Capacity: 28

Total Occupancy: 28

Program Name: MALIBU HORIZON CORP. Record ID: 190460AP
Legal Name: MALIBU HORIZON CORP. Service Type: RES
Address: 265 SOUTH WESTLAKE BOULEVARD Resident Capacity: 6
City, State: MALIBU, CA 90265- Total Occupancy: 6

Phone #: (818)879-9018

Program Name: ALTERNATIVES Record ID: 190225AP
Legal Name: MANAGEMENT TEAM NETWORKS, INC. Service Type: RES
Address: 2530 HYPERION AVENUE Resident Capacity: 20
City, State: LOS ANGELES, CA 90027- Total Occupancy: 24

Phone #: (323)660-2670

Program Name: ALTERNATIVES Record ID: 190225BP
Legal Name: MANAGEMENT TEAM NETWORKS, INC. Service Type: NON
Address: 2530 HYPERION AVENUE Resident Capacity: 0
City, State: LOS ANGELES, CA 90027- Total Occupancy: 0

Phone #: (323)660-2670

Program Name: RENA B. RECOVERY HOME Record ID: 190008CN Legal Name: MARY-LIND FOUNDATION Service Type: RES
Address: 4439/4445/4455 BURNS AVENUE Resident Capacity: 100
City, State: LOS ANGELES, CA 90029 Total Occupancy: 100

Phone #: (213)664-8940

Program Name: BIMINI RECOVERY HOME
Legal Name: MARY-LIND FOUNDATION
Address: 155 SOUTH BIMINI PLACE
City, State: LOS ANGELES, CA 90004
Record ID: 190008AN
Service Type: RES
Resident Capacity: 86
Total Occupancy: 86

Phone #: (213)388-5423

Program Name: ROYAL PALMS RECOVERY HOME
Legal Name: MARY-LIND FOUNDATION
Address: 360 SOUTH WESTLAKE AVENUE
City, State: LOS ANGELES, CA 90057
Record ID: 190008BN
Service Type: RES
Resident Capacity: 135
Total Occupancy: 135

Phone #: (213)483-9201

As of: 04/06/2005 Los Angeles County

Program Name: MATRIX INSTITUTE Record ID: 190297BN Legal Name: MATRIX INSTITUTE ON ADDICTION Service Type: NON Address: 12304 SANTA MONICA BOULEVARD, SUITE 200 Resident Capacity: 0 City, State: WEST LOS ANGELES, CA 90025- Total Occupancy: 0

Phone #: (310)207-4322

Program Name: MATRIX INSTITUTE Record ID: 190297AN
Legal Name: MATRIX INSTITUTE ON ADDICTIONS Service Type: NON

Address: 10100 VENTURA ROLL EVARD SUITE 5

Address: 19100 VENTURA BOULEVARD, SUITE 5 Resident Capacity: 0
City, State: TARZANA, CA 91356- Total Occupancy: 0

Phone #: (818)654-2577

Program Name: MCINTYRE HOUSE Record ID: 190420AN Legal Name: MCINTYRE HOUSE Service Type: RES

Address: 544 NORTH KENMORE AVENUE Resident Capacity: 24
City, State: LOS ANGELES, CA 90004- Total Occupancy: 24

Phone #: (323)662-5878

Program Name: MEN'S 12TH STEP HOUSE Record ID: 190034AN

Legal Name: MEN'S TWELFTH STEP HOUSE, HARBOR AREA

Address: 1005 EAST SIXTH STREET

City, State: LONG BEACH, CA 90802

Service Type: RES

Resident Capacity: 48

Total Occupancy: 48

Phone #: (562)435-1485

Program Name: MIA HEALTH CENTER, INC.

Legal Name: MIA HEALTH CENTER, INC.

Record ID: 190387AN
Service Type: NON

Address: 231 WEST VERNON AVENUE, SUITE 102 Resident Capacity: 0
City, State: LOS ANGELES, CA 90037- Total Occupancy: 0

Phone #: (323)997-1456

Program Name: OMNI CENTER (MEN)/CASA DE PAZ (WOMEN)

Legal Name: MID VALLEY RECOVERY SERVICES, INC.

A Lineary 2420 COCSWELL BOAD.

Program Name: OMNI CENTER (MEN)/CASA DE PAZ (WOMEN)

Record ID: 190035AN

Service Type: RES

Address: 3430 COGSWELL ROAD Resident Capacity: 42 City, State: EL MONTE, CA 91732 Total Occupancy: 42

Phone #: (626)453-3400

Program Name: MARIPOSA RECOVERY HOME Record ID: 190035CN

Legal Name:MID VALLEY RECOVERY SERVICES, INC.Service Type:RESAddress:453 SOUTH INDIANA STREETResident Capacity:13City, State:LOS ANGELES, CA 90063Total Occupancy:15

Phone #: (323)266-7726

Program Name: CHOICES PROGRAM Record ID: 190035GN

Legal Name:MID VALLEY RECOVERY SERVICES, INC.Service Type:NONAddress:5207 NORTH PECK ROADResident Capacity:0City, State:EL MONTE, CA 91732-Total Occupancy:0

Phone #: (626)453-3414

As of: 04/06/2005 Los Angeles County

Program Name: C.O.U.R.T. PROGRAM

Legal Name: MID VALLEY RECOVERY SERVICES, INC.

Address: 2500 TYLER AVENUE

City, State: EL MONTE, CA 91732
Record ID: 190035HN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (626)456-8330

Program Name: MIRACLE STAR REHABILITATION CENTER Record ID: 190214AN Legal Name: MIRACLE STAR WOMEN'S RECOVERING COMMUNITY Service Type: RES

Address: 44664 NORTH CEDAR AVENUE AND 558 NEWGROVE AVENUE Resident Capacity: 24

City, State: LANCASTER, CA 93534 Total Occupancy: 29

Phone #: (661)726-7177

Program Name: MJB RECOVERY, INC. Record ID: 190288BN Legal Name: MJB TRANSITIONAL RECOVERY, INC. Service Type: NON
Address: 11152 SOUTH MAIN STREET Resident Capacity: 0
City, State: LOS ANGELES, CA 90061- Total Occupancy: 0

Phone #: (323)777-2491

Program Name: ON THE RIGHT ROAD TO RECOVERY
Legal Name: MOTHERS OF MINORS LEGAL AID PROCEDURES CORPORATION
Address: 4807 SOUTH NORMANDIE AVENUE
City, State: LOS ANGELES, CA 90037
Record ID: 190208AN
Service Type: RES
Resident Capacity: 70
Total Occupancy: 70

Phone #: (323)299-4695

Program Name: SUMMIT CENTERS--MALIBU Record ID: 190433AP Legal Name: MRTC, INC. Service Type: RES

Address: 31544 ANACAPA VIEW DRIVE Resident Capacity: 6
City, State: MALIBU, CA 90265- Total Occupancy: 6

Phone #: (310)589-0505

Program Name: NATIONAL COUNCIL ON ALCOHOLISM & DRUG DEPENDENCE OF EA Record ID: 190241CN Legal Name: NATIONAL COUNCIL ON ALCOHOLISM & DRUG DEPENDENCE OF EA Service Type: NON Address: 4626 NORTH GRAND AVENUE Resident Capacity: 0
City, State: COVINA, CA 91724- Total Occupancy: 0

Phone #: (626)331-5316

Program Name: NCADD-LB/WOMAN TO WOMAN OUTPATIENT SERVICES/POSITIVE (Record ID: 190178DN Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - L Service Type: NON Address: 3750 LONG BEACH BOULEVARD Resident Capacity: 0 City, State: LONG BEACH, CA 90807- Total Occupancy: 0

Phone #: (562)426-8262

Program Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF Record ID: 190241BN Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF Service Type: NON Address: 160 EAST HOLT AVENUE, UNIT A Resident Capacity: 0 City, State: POMONA, CA 91767- Total Occupancy: 0

Phone #: (909)629-4084

As of: 04/06/2005 Los Angeles County

Program Name: TEENAGE ALCOHOL AND DRUG PROGRAM/ADULT ALCOHOL AND D Record ID: 190049BN Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF Service Type: NON Address: 20655 SOLEDAD CANYON ROAD, SUITE 16 Resident Capacity: 0 City, State: CANYON COUNTRY, CA 91351- Total Occupancy: 0

Phone #: (661)299-2888

Program Name: TEENAGE ALCOHOL AND DRUG PROGRAM/ADULT ALCOHOL AND D Record ID: 190049AN Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF Service Type: NON Address: 6640 VAN NUYS BOULEVARD, SUITE C Resident Capacity: 0 City, State: VAN NUYS, CA 91405- Total Occupancy: 0

Phone #: (818)997-0414

Program Name: WOMEN TO WOMEN RESIDENTIAL PROGRAM
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE- LC Service Type: RES
Address: 836 ATLANTIC AVENUE
City, State: LONG BEACH, CA 90813
Record ID: 190178AN
Record ID: 190178AN
Total Occupancy: 190178AN
Total Occupancy: 190178AN
Total Occupancy: 190178AN
Record ID: 190178AN
Total Occupancy: 190178AN
Total Occupancy: 190178AN

Phone #: (562)426-8262

Program Name: LONG BEACH REGIONAL DRUG COURT PROGRAM
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE-LC
Service Type: NON
Address: 830 ATLANTIC AVENUE
City, State: LONG BEACH, CA 90813Total Occupancy: 0

Phone #: (562)624-9757

Program Name: NATIONAL OUTPATIENT DRUG AND ALCOHOL REHABILITATION CE Legal Name: NATIONAL HEALTH CARE CENTERS, INC.

Address: 11251 NATIONAL BOULEVARD Resident Capacity: 0
City, State: LOS ANGELES, CA 90064- Total Occupancy: 0

Phone #: (310)943-5400

Program Name: NEW BEGINNINGS-RECOVERY TREATMENT CENTER, INC.
Legal Name: NEW BEGINNINGS - RECOVERY TREATMENT CENTER, INC.
Address: 5309 - 5311 SOUTH WESTERN AVENUE
City, State: LOS ANGELES, CA 90062Record ID: 190337AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (213)595-3450

Program Name: NEW BEGINNINGS RECOVERY TREATMENT CENTER, INC.
Legal Name: NEW BEGINNINGS RECOVERY TREATMENT CENTER, INC.
Address: 1137 WEST 6TH STREET
City, State: LOS ANGELES, CA 90017Resident Capacity: 0
Total Occupancy: 0

Phone #: (213)250-1005

Program Name: NEW DIRECTIONS Record ID: 190209AN Legal Name: NEW DIRECTIONS, INC. Service Type: RES-DETOX

Address: 11301 WILSHIRE BLVD, BLDG 257 AND 11303 WILSHIRE BLVD, B: Resident Capacity: 199 City, State: LOS ANGELES, CA 90073 Total Occupancy: 199

Phone #: (310)914-4045

As of: 04/06/2005 Los Angeles County

Program Name: NEW DIRECTIONS WOMENS PROGRAM
Legal Name: NEW DIRECTIONS, INC.
Record ID: 190209BN
Service Type: RES

Address: 12536 MITCHELL AVENUE Resident Capacity: 8
City, State: LOS ANGELES, CA 90066- Total Occupancy: 8

Phone #: (310)398-0191

Program Name: NEW FOUND LIFE Record ID: 190184AP

Legal Name: NEW FOUND LIFE, INC. Service Type: RES

Address: 2211 AND 2137 EAST OCEAN BOULEVARD Resident Capacity: 23
City, State: LONG BEACH, CA 90803-2440 Total Occupancy: 23

Phone #: (562)434-4060

Program Name: NEW HORIZONS HOUSING AND INDEPENDENT LIVING Record ID: 190371AN

Legal Name: NEW HORIZONS HOUSING AND INDEPENDENT LIVING

Address: 11730 AND 11732 RUNNYMEDE STREET

City, State: NORTH HOLLYWOOD, CA 91605
Total Occupancy: 40

Phone #: (818)982-5663

Program Name: NEW MILLENNIUM COUNSELING SERVICES, INC. Record ID: 190345AP

Legal Name: NEW MILLENNIUM COUNSELING SERVICES, INC.

Address: 6449 WHITTIER BOULEVARD
City, State: LOS ANGELES, CA 90022Total Occupancy: 0

Phone #: (805)217-7824

Program Name: NEW PERCEPTIONS Record ID: 190416AP

Legal Name: NEW PERCEPTIONS DRUG AND ALCOHOL PROGRAM

Service Type: RES-DETOX

Address: 17813 MALDEN STREET Resident Capacity: 6
City, State: NORTHRIDGE, CA 91325- Total Occupancy: 12

Phone #: (818)885-9596

Program Name: VICTORY HOUSE/AWARE PROGRAM Record ID: 190058AN

Legal Name:NEW WAY FOUNDATION, INC.Service Type:RESAddress:207 NORTH VICTORY BOULEVARDResident Capacity:50City, State:BURBANK, CA 91502Total Occupancy:50

Phone #: (818)842-9416

Program Name: NEW WAY AWARE RECOVERY PROGRAM Record ID: 190058BN

Legal Name:NEW WAY FOUNDATION, INC.Service Type:NONAddress:844 NORTH HOLLYWOOD WAYResident Capacity:0City, State:BURBANK, CA 91505-Total Occupancy:0

Phone #: (818)842-9446

Program Name: NOBLE HEART SERVICES Record ID: 190437AN

Legal Name:NOBLE HEART SERVICES, INC.Service Type:NONAddress:16610 CRENSHAW BOULEVARDResident Capacity:0City, State:TORRANCE, CA 90504-Total Occupancy:0

Phone #: (310)856-0406

As of: 04/06/2005 Los Angeles County

Program Name: COMMUNITY PREVENTION RECOVERY PROGRAM
Legal Name: NORTHEAST VALLEY HEALTH CORPORATION
Address: 1161 NORTH MACLAY AVENUE, UNIT B
City, State: SAN FERNANDO, CA 91340Record ID: 190038CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (818)361-1211

Program Name: OASIS WOMEN'S RECOVERING COMMUNITY
Legal Name: OASIS WOMEN'S RECOVERING COMMUNITY
Address: 13832 POLK STREET
City, State: SYLMAR, CA 91342
Record ID: 190155BN
Service Type: RES
Resident Capacity: 16

Phone #: (818)362-0986

Program Name: OUTREACH HEALTH SERVICES, INC.
Legal Name: OUTREACH HEALTH SERVICES, INC.
Address: 431 WEST COMPTON BOULEVARD
City, State: COMPTON, CA 90220Total Occupancy: 0

Phone #: (310)603-5353

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254EN
Legal Name: PACIFIC CLINICS Service Type: NON
Address: 909 SOUTH FAIR OAKS AVENUE Resident Capacity: 0
City, State: PASADENA, CA 91105- Total Occupancy: 0

Phone #: (626)795-8471

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254HN
Legal Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254HN
Service Type: NON
Address: 902 SOUTH MYRTLE AVENUE Resident Capacity: 0
City, State: MONROVIA, CA 91016- Total Occupancy: 0

Phone #: (626)303-1541

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254GN
Legal Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254GN
Service Type: NON
Address: 1020 SOUTH ARROYO PARKWAY Resident Capacity: 0
City, State: PASADENA, CA 91105-3214 Total Occupancy: 0

Phone #: (626)403-2794

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254LN Legal Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254LN Service Type: NON Address: 9353 EAST VALLEY BOULEVARD Resident Capacity: 0
City, State: ROSEMEAD, CA 91770-1934 Total Occupancy: 0

Phone #: (626)287-2988

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254JN Legal Name: PACIFIC CLINICS Service Type: NON
Address: 1172 SOUTH GRAND AVENUE Resident Capacity: 0
City, State: GLENDORA, CA 91740- Total Occupancy: 0

Phone #: (626)335-5980

As of: 04/06/2005 Los Angeles County

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC

Legal Name: PACIFIC CLINICS

Record ID: 190254IN

Service Type: NON

Address: 70 NORTH HUDSON AVENUE Resident Capacity: 0
City, State: PASADENA, CA 91101- Total Occupancy: 0

Phone #: (626)744-5230

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254MN

Legal Name: PACIFIC CLINICS

Address: 66 HURLBUT

City, State: PASADENA, CA 91105
Total Occupancy: 0

Phone #: (626)441-4221

Program Name: SHARPER FUTURE LONG BEACH RESIDENTIAL
Legal Name: PACIFIC FORENSIC PSYCHOLOGY ASSOCIATES, INC.
Address: 834 PACIFIC AVENUE
City, State: LONG BEACH, CA 90813Record ID: 190431AP
Service Type: RES
Resident Capacity: 37
Total Occupancy: 37

Phone #: (213)738-8853

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 190254KN Legal Name: PACIFICS CLINICS Service Type: NON

Address: 11721 A TELEGRAPH ROAD
City, State: SANTA FE SPRINGS, CA 90670-3691
Resident Capacity: 0
Total Occupancy: 0

Phone #: (562)949-8455

Program Name:PALM HOUSE RECOVERY HOMERecord ID:190040ANLegal Name:PALM HOUSE, INCORPORATEDService Type:RESAddress:2515 EAST JEFFERSON STREETResident Capacity:18City, State:CARSON, CA 90810Total Occupancy:18

Phone #: (310)830-7803

Program Name: PARAMOUNT HEALTHCARE FOUNDATION Record ID: 190331AP
Legal Name: PARAMOUNT REHABILITATION CENTER, INCORPORATED Service Type: NON
Address: 531 NORTH LARCHMONT BOULEVARD Resident Capacity: 0
City, State: LOS ANGELES, CA 90004-1305 Total Occupancy: 0

Phone #: (323)462-7574

Program Name: PARAMOUNT RESIDENTIAL PROGRAM I
Legal Name: PARAMOUNT RESIDENTIAL I
Address: 6661 FARMDALE AVENUE
City, State: NORTH HOLLYWOOD, CA 91606Record ID: 190457AN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 0

Phone #: (000)000-0000

Program Name: PASADENA COUNCIL ON ALCOHOLISM & DRUG DEPENDENCY
Legal Name: PASADENA COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCY
Address: 1245 EAST WALNUT STREET, SUITES 101, 103, 107, 109, 115, 117, A
Resident Capacity: 0
City, State: PASADENA, CA 91106Total Occupancy: 0

Phone #: (626)795-9127

As of: 04/06/2005 Los Angeles County

Program Name: PASADENA RECOVERY CENTER Record ID: 190250BP Legal Name: PASADENA RECOVERY CENTER, INC. Service Type: NON Address: 1811 NORTH RAYMOND AVENUE Resident Capacity: 0
City, State: PASADENA, CA 91103- Total Occupancy: 0

Phone #: (626)345-9992

Program Name: PASADENA RECOVERY CENTER Record ID: 190250AP
Legal Name: PASADENA RECOVERY CENTER, INC. Service Type: RES
Address: 1811 NORTH RAYMOND AVENUE Resident Capacity: 88
City, State: PASADENA, CA 91103- Total Occupancy: 98

Phone #: (626)345-9992

Program Name: CASTLE SUBSTANCE ABUSE PROGRAM - WEST
Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA
Address: 1319 SOUTH MANHATTAN PLACE
City, State: LOS ANGELES, CA 90019

Record ID: 190013AN
Service Type: RES

Resident Capacity: 64

Total Occupancy: 64

Phone #: (323)735-7059

Program Name: CASTLE SUBSTANCE ABUSE PROGRAM
Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA
Address: 3021 SOUTH VERMONT AVENUE
City, State: LOS ANGELES, CA 90007
Record ID: 190013BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (323)732-9124

Program Name: CASTLE SUBSTANCE ABUSE PROGRAM - EAST
Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA
Address: 4771 SOUTH MAIN STREET
City, State: LOS ANGELES, CA 90037
Record ID: 190013CN
Service Type: RES
Resident Capacity: 61
Total Occupancy: 61

Phone #: (323)735-7059

Program Name: SAN FERNANDO VALLEY ALCOHOL & DRUG REHABILITATION COM Legal Name: PEOPLE IN PROGRESS, INCORPORATED Service Type: RES

Address: 8140 SUNLAND BOULEVARD Resident Capacity: 88

City, State: SUN VALLEY, CA 91352 Total Occupancy: 91

Phone #: (818)768-7494

Program Name: PEOPLE IN PROGRESS, INC.

Legal Name: PEOPLE IN PROGRESS, INCORPORATED

Address: 1636 WEST EIGHTH STREET

City, State: LOS ANGELES, CA 90017
Record ID: 190043EN

Service Type: RES

Resident Capacity: 0

Total Occupancy: 0

Phone #: (213)388-0818

Program Name:NEW DIRECTIONSRecord ID:190253ANLegal Name:PERLA, RICHARD J.Service Type:NONAddress:12287-B LA MIRADA BOULEVARDResident Capacity:0City, State:LA MIRADA, CA 90638-Total Occupancy:0

Phone #: (562)944-3735

Los Angeles County As of: 04/06/2005

Program Name: PHOENIX HOUSES OF CALIFORNIA Record ID: 190232AN Legal Name: PHOENIX HOUSES OF CALIFORNIA, INC. Service Type: RES Resident Capacity: 31 Address: 345 WEST FOOTHILL BOULEVARD Total Occupancy: 31 City, State: MONROVIA, CA 91016-

Phone #: (626)357-8612

Program Name: PHOENIX HOUSES OF CALIFORNIA Record ID: 190232BN Legal Name: PHOENIX HOUSES OF CALIFORNIA, INC. Service Type: RES Resident Capacity: 60 Address: 11015 BLOOMFIELD AVENUE Total Occupancy: 60 City, State: SANTA FE SPRINGS, CA 90670-

Phone #: (562)906-2676

Program Name: PHOENIX HOUSE: OUTPATIENT SERVICES Record ID: 190115CN Service Type: NON Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC. Resident Capacity: 0 Address: 503 OCEAN FRONT WALK Total Occupancy: 0

City, State: VENICE, CA 90291 Phone #: (310)392-3070

Program Name: PHOENIX HOUSE - VENICE Record ID: 190115AN Service Type: RES Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.

Address: 503 OCEAN FRONT WALK Resident Capacity: 53 City, State: VENICE, CA 90291 Total Occupancy: 53

Phone #: (310)392-3070

Record ID: 190115BN Program Name: PHOENIX HOUSES OF LOS ANGELES Service Type: DSS Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC. Resident Capacity: 0 Address: 11600 ELDRIDGE AVENUE Total Occupancy: 0 City, State: LAKE VIEW TERRACE, CA 91342

Phone #: (818)896-1121

Record ID: 190329AN Program Name: CLEAN AND FREE CORPORATION Service Type: NON Legal Name: POM-POM'S CASTLE Address: 971 EAST 43RD STREET Resident Capacity: 0 Total Occupancy: 0 City, State: LOS ANGELES, CA 90011-

Phone #: (999)999-9999

Record ID: 190234AN Program Name: POMONA ALCOHOL & DRUG RECOVERY CENTER, INC. Legal Name: POMONA ALCOHOL & DRUG RECOVERY CENTER, INC. Service Type: NON Address: 636 AND 640 SOUTH GAREY AVENUE Resident Capacity: 0 Total Occupancy: 0 City, State: POMONA, CA 91766-

Phone #: (909)622-2273

Record ID: 190409AN Program Name: POMONA COMMUNITY CRISIS CENTER Service Type: NON Legal Name: POMONA COMMUNITY CRISIS CENTER Address: 232, 240, AND 248 EAST MONTEREY AVENUE Resident Capacity: 0 Total Occupancy: 0

City, State: POMONA, CA 91767-

Phone #: (909)623-1588

As of: 04/06/2005 Los Angeles County

Program Name: LIVING PROOF RECOVERY CENTER Record ID: 190316AP Legal Name: POOL, GERALD M. AND MAXWELL, MARCIA A. Service Type: NON Address: 248 EAST FOOTHILL BOULEVARD, SUITE 102 Resident Capacity: 0 City, State: MONROVIA, CA 91016- Total Occupancy: 0

Phone #: (626)791-4323

Program Name: POSITIVE STEPS, INC.

Legal Name: POSITIVE STEPS, INC.

Address: 5230 NORTH CLARK AVENUE SHITE 18

Record ID: 190289AP

Service Type: NON

Recident Capacity: 0

Address: 5230 NORTH CLARK AVENUE, SUITE 18 Resident Capacity: 0
City, State: LAKEWOOD, CA 90712- Total Occupancy: 0

Phone #: (562)804-2700

Program Name:PRIDE HEALTH SERVICESRecord ID:190212ANLegal Name:PRIDE HEALTH SERVICESService Type:NONAddress:8619 SOUTH CRENSHAW BOULEVARDResident Capacity:0

City, State: INGLEWOOD, CA 90305

Total Occupancy: 0

Phone #: (310)677-9019

Program Name: PRIDE HEALTH SERVICES--VERMONT CENTER
Legal Name: PRIDE HEALTH SERVICES

Address: 8904 SOUTH VERMONT AVENUE

Resident Capacity: 0

City, State: LOS ANGELES, CA 90044
Resident Capacity: 0

Total Occupancy: 0

Phone #: (323)753-5950

Program Name: IMPACT DRUG AND ALCOHOL TREATMENT CENTER Record ID: 190094AN

Legal Name: PRINCIPLES, INC.

Address: 1680 NORTH FAIR OAKS AVENUE AND 38 PENN STREET

City, State: PASADENA, CA 91103

Total Occupancy: 135

Phone #: (626)798-0884

Program Name: IMPACT OUTPATIENT/AFTERCARE PROGRAM Record ID: 190094GN

Legal Name: PRINCIPLES, INC.

Address: 2623 FOOTHILL BOULEVARD, SUITE 104

City, State: PASADENA, CA 91107
Total Occupancy: 0

Phone #: (626)798-0884

Program Name: IMPACT TRANSITIONAL LIVING FACILITY Record ID: 190094CN

Legal Name: PRINCIPLES, INC.

Address: 2659 AND 2661 NINA STREET

City, State: PASADENA, CA 91107
Total Occupancy: 21

Phone #: (626)798-0884

Program Name: PROGRESSIVE CARE BEHAVIOR MANAGEMENT SERVICES Record ID: 190410AP

Legal Name: PROGRESSIVE CARE BEHAVIOR MANAGEMENT SERVICES, INC. Service Type: NON Address: 500 EAST CARSON PLAZA COURT, SUITE 213 Resident Capacity: 0
City, State: CARSON, CA 90746- Total Occupancy: 0

Phone #: (310)327-2131

As of: 04/06/2005 Los Angeles County

Program Name: PROMAL2, INC. DBA PROMISES TREATMENT CENTERS II Record ID: 190074GP
Legal Name: PROMAL2, INC. Service Type: RES-DETOX

Address: 20723 ROCKCROFT DRIVE Resident Capacity: 6
City, State: MALIBU, CA 90265 Total Occupancy: 6

Phone #: (213)525-1967

Program Name: PROTOTYPES WOMEN'S CENTER Record ID: 190101AN

Legal Name: PROTOTYPES, A CENTER FOR INNOVATION IN HEALTH, MENTAL HI Service Type: RES Address: 845 EAST ARROW HIGHWAY AND 831 EAST ARROW HIGHWAY, 1 Resident Capacity: 188 City, State: POMONA, CA 91767 Total Occupancy: 188

Phone #: (909)624-1233

Program Name: PROTOTYPES OUTPATIENT SERVICES Record ID: 190101CN

Legal Name: PROTOTYPES, A CENTER FOR INNOVATION IN HEALTH, MENTAL HE Service Type: NON

Address: 831 EAST ARROW HIGHWAY, WEST WING

City, State: POMONA, CA 91767
Total Occupancy: 0

Phone #: (909)392-7646

Program Name: PROTOTYPES S.T.A.R. HOUSE/DOMESTIC VIOLENCE PROGRAM Record ID: 190101DN

Legal Name: PROTOTYPES, CENTERS FOR INNOVATION IN HEALTH, MENTAL HE. Service Type: RES Address: 5601 WEST SLAUSON, SUITE 200 Resident Capacity: 26 City, State: CULVER CITY, CA 90230- Total Occupancy: 26

Phone #: (310)641-7795

Program Name: R.A.P. COMMUNITY RECOVERY SERVICES Record ID: 190266AN Legal Name: R.A.P. COMUNITY RECOVERY SERVICES Service Type: NON Address: 2055 NORTH GAREY, SUITE 2 Resident Capacity: 0

City, State: POMONA, CA 91767- Total Occupancy: 0

Phone #: (909)596-5335

Program Name: THE RENAISSANCE BEACH HOUSE Record ID: 190392BP
Legal Name: RENAISSANCE RECOVERY SERVICES, LLC Service Type: RES-DETOX

Address: 11852 PACIFIC COAST HIGHWAY Resident Capacity: 6
City, State: MALIBU, CA 90265- Total Occupancy: 6

Phone #: (310)589-8500

Program Name: THE RENAISSANCE Record ID: 190392AP

Legal Name:RENAISSANCE RECOVERY SERVICES, LLCService Type:RESAddress:30553 MORNING VIEW DRIVEResident Capacity:6City, State:MALIBU, CA 90265-Total Occupancy:6

Phone #: (310)589-8500

Program Name: STORK CLUB - OPTIONS FOR RECOVERY AT HARBOR UCLA RESEAR Record ID: 190351AN

Legal Name: RESEARCH AND EDUCATION INSTITUTE AT HARBOR UCLA MEDICA Service Type: NON Address: 1124 WEST CARSON STREET, BUILDING N-33 Resident Capacity: 0 City, State: TORRANCE, CA 90502- Total Occupancy: 0

Phone #: (310)222-5410

As of: 04/06/2005 Los Angeles County

Program Name: RESEDA SUBSTANCE ABUSE TREATMENT CENTER Record ID: 190324AP Legal Name: RESEDA SUBSTANCE ABUSE TREATMENT CENTER, INC. Service Type: NON Address: 8745 PARTHENIA PLACE, UNIT 4 Resident Capacity: 0 City, State: NORTH HILLS, CA 91343- Total Occupancy: 0

Phone #: (818)895-5002

Program Name: RICKMAN RECOVERY CENTERS Record ID: 190062BP Legal Name: RICKMAN RECOVERY CENTER Service Type: NON
Address: 1274 EAST CENTER COURT, SUITE 112 Resident Capacity: 0
City, State: COVINA, CA 91724- Total Occupancy: 0

Phone #: (626)962-3203

Program Name: RBPAC/LB

Legal Name: ROBERT BRIDGES, PAC, AND LORRAINE BRIDGES

Service Type: RES

Address: 4567 - 4571 WEST WASHINGTON BOULEVARD Resident Capacity: 14
City, State: LOS ANGELES, CA 90016- Total Occupancy: 15

Phone #: (323)931-3211

Program Name: SADDLE GROUP, INC. Record ID: 190310AP
Legal Name: SADDLE GROUP, INC. Service Type: NON

Address: 3060 LONG BEACH BOULEVARD Resident Capacity: 0
City, State: LONG BEACH, CA 90807- Total Occupancy: 0

Phone #: (562)427-2323

Program Name: SAN MARTIN DE PORRES COUNSELING CENTER Record ID: 190440AN Legal Name: SAN MARTIN DE PORRES COUNSELING CENTER, INC. Service Type: NON Address: 8621 BELLANCA AVENUE #215 Resident Capacity: 0
City, State: LOS ANGELES, CA 90045- Total Occupancy: 0

Phone #: (310)641-1633

Program Name: SANTA ANITA FAMILY SERVICE
Legal Name: SANTA ANITA FAMILY SERVICE
Address: 716 NORTH CITRUS AVENUE
City, State: COVINA, CA 91723Record ID: 190301BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (626)966-1755

Program Name: SANTA ANITA FAMILY SERVICE Record ID: 190301AN Legal Name: SANTA ANITA FAMILY SERVICE Service Type: NON

Address: 605 SOUTH MYRTLE AVENUE Resident Capacity: 0
City, State: MONROVIA, CA 91016- Total Occupancy: 0

Phone #: (626)359-9358

Program Name: NEW START - SANTA MONICA BAY AREA DRUG ABUSE COUNCIL, IN Record ID: 190304AN

Legal Name:SANTA MONICA BAY AREA DRUG ABUSE COUNCILService Type:NONAddress:2116 WILSHIRE BOULEVARD, SUITE 230Resident Capacity:0City, State:SANTA MONICA, CA 90403-Total Occupancy:0

Phone #: (310)586-0059

As of: 04/06/2005 Los Angeles County

Program Name: KHEPER LIFE ENRICHMENT INSTITUTE Record ID: 190333AN Legal Name: SAY "YES" TO LIFE, INC. Service Type: NON Address: 3406 WEST 75TH STREET Resident Capacity: 0
City, State: LOS ANGELES, CA 90043-4926 Total Occupancy: 0

Phone #: (323)750-7550

Program Name: SBAR2, INC. DBA PROMISES TREATMENT CENTERS III Record ID: 190074BP

Legal Name: SBAR2, INC. Service Type: RES-DETOX

Address: 3743 SOUTH BARRINGTON AVENUE Resident Capacity: 6
City, State: LOS ANGELES, CA 90066 Total Occupancy: 6

Phone #: (310)390-2340

Program Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Record ID: 190081DN

Service Type: NON

Address: 248 EAST ROWLAND STREET

City, State: COVINA, CA 91723
Resident Capacity: 0

Total Occupancy: 0

Phone #: (626)332-3145

Program Name: RIVER COMMUNITY DAY TREATMENT Record ID: 190081BN Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Address: 510 SOUTH SECOND AVENUE, SUITE 6 AND 7 Resident Capacity: 0

City, State: COVINA, CA 91723-3017 Total Occupancy: 0

Phone #: (626)974-8122

Program Name: THE RIVER COMMUNITY Record ID: 190081AN

Legal Name:SOCIAL MODEL RECOVERY SYSTEMS, INC.Service Type:RESAddress:23701 EAST FORK ROADResident Capacity:38City, State:AZUSA, CA 91702Total Occupancy:38

Phone #: (626)910-1202

Program Name: FLOSSIE LEWIS RECOVERY CENTER Record ID: 190020CN Legal Name: SOUTH BAY ALCOHOLISM SERVICES Service Type: RES

Address: 341 EAST SIXTH STREET, APARTMENTS 1-4 Resident Capacity: 12

City, State: LONG BEACH, CA 90802 Total Occupancy: 12

Phone #: (562)435-7350

Program Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF Record ID: 190020GN

Legal Name:SOUTH BAY ALCOHOLISM SERVICESService Type:NONAddress:1334 POST AVENUEResident Capacity:0City, State:TORRANCE, CA 90501-Total Occupancy:0

Phone #: (310)328-1460

Program Name: FLOSSIE LEWIS/NEW LIFE CENTER Record ID: 190020FN Legal Name: SOUTH BAY ALCOHOLISM SERVICES Service Type: RES

Address: 615 ELM AVENUE

City, State: LONG BEACH, CA 90802

Service Type. Re
Resident Capacity: 6
Total Occupancy: 12

Phone #: (562)435-7350

As of: 04/06/2005 Los Angeles County

Program Name: FLOSSIE LEWIS RECOVERY CENTER Record ID: 190020DN Legal Name: SOUTH BAY ALCOHOLISM SERVICES Service Type: RES

Address: 351 EAST SIXTH STREET Resident Capacity: 6
City, State: LONG BEACH, CA 90802 Total Occupancy: 6

Phone #: (562)435-7350

Program Name: SOUTH BAY HUMAN SERVICES Record ID: 190268AN Legal Name: SOUTH BAY HUMAN SERVICES COALITION, INC. Service Type: NON Address: 2370 WEST CARSON STREET, SUITE 136 Resident Capacity: 0
City, State: TORRANCE, CA 90501- Total Occupancy: 0

Phone #: (310)328-0780

Program Name: ANGEL STEP TOO Record ID: 190011VN Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES
Address: SEE BELOW IN THE COMMENT SECTION. Resident Capacity: 50
City, State: BELLFLOWER, CA 90706 Total Occupancy: 50

Phone #: (562)461-9272

Program Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS/PARAMC Record ID: 190011AGN Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: NON

Address: 8022 SOMERSET Resident Capacity: 0
City, State: PARAMOUNT, CA 90273- Total Occupancy: 0

Phone #: (562)272-4004

Program Name: DRUG COURT Record ID: 190011AEN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.

Address: 8700 CLETA STREET

City, State: DOWNEY, CA 90241
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (562)862-9766

Program Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. RES Record ID: 190011AFN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES
Address: 11501 DOLAN Resident Capacity: 47
City, State: DOWNEY, CA 90241- Total Occupancy: 57

Phone #: (562)923-7894

Program Name: LA CASITA DE LAS MAMAS OF DOWNEY Record ID: 1900110N

Legal Name:SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.Service Type:RESAddress:10615 DOWNEY AVENUEResident Capacity:10City, State:DOWNEY, CA 90241Total Occupancy:10

Phone #: (562)622-2268

Program Name: AWAKENINGS Record ID: 190011NN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES
Address: 12322 CLEARGLEN, APARTMENT 4
City, State: WHITTIER, CA 90604
Total Occupancy: 4

Phone #: (562)947-3835

As of: 04/06/2005 Los Angeles County

Program Name: AWAKENINGS Record ID: 190011MN
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Service Type: RES

Address: 12322 CLEARGLEN, APARTMENT 3 Resident Capacity: 4
City, State: WHITTIER, CA 90604 Total Occupancy: 4

Phone #: (562)947-3835

Program Name: AWAKENINGS Record ID: 190011LN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES Address: 12322 CLEARGLEN, APARTMENT 2 Resident Capacity: 6

City, State: WHITTIER, CA 90604 Total Occupancy: 6

Phone #: (562)947-3835

Program Name: AWAKENINGS Record ID: 190011KN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES

Address: 12322 CLEARGLEN, APARTMENT 1 Resident Capacity: 6
City, State: WHITTIER, CA 90604 Total Occupancy: 6

Phone #: (562)947-3835

Program Name: BABY STEP INN Record ID: 190011JN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES

Address: 1755 FREEMAN AVENUE, APARTMENTS 1, 2, 3, AND 4

City, State: LONG BEACH, CA 90804

Total Occupancy: 24

Phone #: (562)923-4545

Program Name: DRUG AND ALCOHOL COUNSELING SERVICES Record ID: 190011AAN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.

Address: 11455 PARAMOUNT BOULEVARD, SUITE J AND 11500 PARAMOU

City, State: DOWNEY, CA 90241

Service Type: NON

Total Occupancy: 0

Phone #: (562)923-4545

Program Name: FOLEY HOUSE Record ID: 190011AN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES Address: 10501, 10505, 10511, 10517, AND 10519 MILLS AVENUE Resident Capacity: 30 City, State: WHITTIER, CA 90604- Total Occupancy: 30

Phone #: (562)944-7953

Program Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS-LONG BI Record ID: 190011CN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES
Address: 757 LOMA VISTA DRIVE
City, State: LONG BEACH, CA 90813
Total Occupancy: 6

Phone #: (562)923-4545

Program Name: C.I.D.E.R. HOUSE Record ID: 190011HN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES-DETOX

Address: 11401 BLOOMFIELD AVENUE, BUILDINGS 209, AND 313 Resident Capacity: 100 City, State: NORWALK, CA 90650 Total Occupancy: 100

Phone #: (562)864-7724

As of: 04/06/2005 Los Angeles County

Program Name: BUD AND MARCIE MCDONALD HOUSE Record ID: 190011GN Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.

Address: 9608 REGATTA STREET Resident Capacity: 11

City, State: WHITTIER, CA 90604

Total Occupancy: 11

Phone #: (562)944-5617

Program Name: LA CASITA DE LAS MAMAS OF DOWNEY
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 10603 DOWNEY AVENUE
City, State: DOWNEY, CA 90241

Record ID: 190011RN
Service Type: RES

Resident Capacity: 5
Total Occupancy: 10

Phone #: (562)622-2268

Program Name: LA CASITA DE LAS MAMAS OF DOWNEY
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.
Address: 10621 DOWNEY AVENUE
City, State: DOWNEY, CA 90241

Record ID: 190011PN
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10

Phone #: (562)622-2268

Program Name: INTEGRATED CARE SYSTEM/YOUNG PEOPLE'S OPPORTUNITY FOR U Record ID: 190210BN Legal Name: SPECIAL SERVICE FOR GROUPS, INC. Service Type: NON Address: 5715 SOUTH BROADWAY Resident Capacity: 0 City, State: LOS ANGELES, CA 90037- Total Occupancy: 0

Phone #: (213)621-2800

Program Name: PACIFIC ASIAN ALCOHOL AND DRUG PROGRAM
Legal Name: SPECIAL SERVICE FOR GROUPS, INC.
Address: 532 SOUTH VERMONT AVENUE, SUITE 102
City, State: LOS ANGELES, CA 90020
Record ID: 190210AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (213)738-3361

Program Name:SHARE PROGRAM
Legal Name:Record ID:190247DNAddress:SPIRITT FAMILY SERVICESService Type:NONAddress:147 SOUTH SIXTH AVENUEResident Capacity:0City, State:LA PUENTE, CA 91746-Total Occupancy:0

Phone #: (626)968-0041

Program Name: SPIRITT FAMILY SERVICES Record ID: 190247EN
Legal Name: SPIRITT FAMILY SERVICES Service Type: NON
Address: 1393 GRAND AVENUE, SUITE A
City, State: GLENDORA, CA 91740- Total Occupancy: 0

Phone #: (626)852-2314

Program Name: SPIRITT FAMILY SERVICES ALCOHOL AND DRUG PROGRAM
Legal Name: SPIRITT FAMILY SERVICES
Address: 13135 BARTON ROAD
Resident Capacity: 0

Address: 13135 BARTON ROAD Resident Capacity: 0
City, State: SANTA FE SPRINGS, CA 90605Total Occupancy: 0

Phone #: (562)948-2886

As of: 04/06/2005 Los Angeles County

Program Name: SHARE PROGRAM
Legal Name: SPIRITT FAMILY SERVICES
Address: 11046 VALLEY MALL
City, State: EL MONTE, CA 91731-2617

Record ID: 190247CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (626)442-4788

Program Name: STARTING OVER RECOVRY HOME
Legal Name: STARTING OVER RECOVERY HOMES, INC.
Address: 1385 DEVERON PLACE
City, State: POMONA, CA 91767Record ID: 190418AN
Service Type: RES
Resident Capacity: 8
Total Occupancy: 8

Phone #: (909)376-7652

Program Name: STEPPING STONES HOME I & II Record ID: 190118BN Legal Name: STEPPING STONES HOME Service Type: RES

Address: 17719 AND 17727 EAST CYPRESS STREET Resident Capacity: 18

City, State: COVINA, CA 91722 Total Occupancy: 18

Phone #: (626)967-2677

Program Name: FRAN'S PLACE Record ID: 190118CN Legal Name: STEPPING STONES HOME Service Type: RES

Address: 823 EAST CYPRESS STREET Resident Capacity: 6
City, State: COVINA, CA 91722- Total Occupancy: 6

Phone #: (626)967-2677

Program Name: COLBY HOUSE III Record ID: 190118DN

Legal Name: STEPPING STONES HOME

Address: 18417 ORKNEY STREET

City, State: AZUSA, CA 91702

Service Type: RES

Resident Capacity: 6

Total Occupancy: 14

Phone #: (626)967-2677

Program Name: STUDIO 12 CARE/COUNSELING/SOBER LIVING Record ID: 190361AN

Legal Name: STUDIO 12 Service Type: RES

Address: 12406 MAGNOLIA BOULEVARD Resident Capacity: 24
City, State: VALLEY VILLAGE, CA 91607- Total Occupancy: 24

Phone #: (818)761-7374

Program Name: SUBSTANCE ABUSE FOUNDATION Record ID: 190077AJN

Legal Name: SUBSTANCE ABUSE FOUNDATION OF LONG BEACH INC.

Address: 1430 PACIFIC AVENUE

City, State: LONG BEACH, CA 90813
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (562)987-5722

Program Name: SUBSTANCE ABUSE FOUNDATION Record ID: 190077RN

Legal Name: SUBSTANCE ABUSE FOUNDATION OF LONG BEACH INC.

Address: 1046 REDONDO AVENUE

City, State: LONG BEACH, CA 90804
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (562)987-5722

As of: 04/06/2005 Los Angeles County

Program Name: A NEW DAY CENTER - OUTPATIENT PROGRAM
Legal Name: SUBSTANCE ABUSE FOUNDATION OF LONG BEACH INC.
Address: 3125 AND 3137 EAST SEVENTH STREET
City, State: LONG BEACH, CA 90804
Record ID: 190077CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

City, State: LONG BEACH, CA 90804 Phone #: (562)987-5724

Program Name: SOBRIETY HOUSE OF LONG BEACH Record ID: 190077AHN

Legal Name: SUBSTANCE ABUSE FOUNDATION OF LONG BEACH, INC. Service Type: RES-DETOX

Address: VARIOUS ADDRESSES (SEE BELOW) Resident Capacity: 92 City, State: LONG BEACH, CA 90804- Total Occupancy: 92

Phone #: (568)987-5722

Program Name:SUNRISE COMMUNITY COUNSELING CENTERRecord ID:190110CNLegal Name:SUNRISE COMMUNITY COUNSELING CENTERService Type:NONAddress:537 SOUTH ALVARADO STREETResident Capacity:0

Total Occupancy: 0

City, State: LOS ANGELES, CA 90057-2903 Phone #: (213)207-2770

Program Name: S. H. A. W. L. HOUSE Record ID: 190147AN

Legal Name:SUPPORT FOR HARBOR AREA WOMEN'S LIVESService Type:RESAddress:936 SOUTH CENTRE STREETResident Capacity:13City, State:SAN PEDRO, CA 90731Total Occupancy:13

Phone #: (310)521-9310

Program Name: OUTPATIENT ANTELOPE VALLEY DAY TREATMENT SERVICES Record ID: 190085GN

Legal Name: TARZANA TREATMENT CENTER, INC.

Address: 44447 NORTH 10TH STREET WEST, BUILDING #A

City, State: LANCASTER, CA 93534

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (661)726-2630

Program Name: TARZANA TREATMENT CENTER Record ID: 190085AN Legal Name: TARZANA TREATMENT CENTER, INC. Service Type: RES

Address: 18646 OXNARD STREET, SOUTH AND WEST WINGS

Resident Capacity: 112

City, State: TARZANA, CA 91356

Total Occupancy: 122

Phone #: (818)996-1051

Program Name: TARZANA TREATMENT CENTER - DETOX Record ID: 190085DN Legal Name: TARZANA TREATMENT CENTER, INC. Service Type: DHS

Address: 18646 OXNARD STREET, DETOXIFICATION UNIT Resident Capacity: 0

City, State: TARZANA, CA 91356 Total Occupancy: 0

Phone #: (818)996-1051

Program Name: TARZANA TREATMENT CENTER OUTPATIENT SERVICES Record ID: 190085FN

Legal Name:TARZANA TREATMENT CENTER, INC.Service Type:NONAddress:18646 OXNARD STREETResident Capacity:0City, State:TARZANA, CA 91356Total Occupancy:0

Phone #: (818)996-1051

As of: 04/06/2005 Los Angeles County

Program Name: TARZANA TREATMENT CENTER - LONG BEACH
Legal Name: TARZANA TREATMENT CENTER, INC.
Address: 2101-45 MAGNOLIA AVENUE
City, State: LONG BEACH, CA 90806
Record ID: 190085BN
Service Type: RES
Resident Capacity: 84
Total Occupancy: 109

Phone #: (562)218-1868

Program Name: TARZANA TREATMENT CENTER - LANCASTER
Legal Name: TARZANA TREATMENT CENTER, INC.
Address: 44447 NORTH 10TH STREET WEST, BUILDING #B
City, State: LANCASTER, CA 93534Record ID: 190085LN
Service Type: RES
Resident Capacity: 40
Total Occupancy: 51

Phone #: (661)726-2630

Program Name: TARZANA TREATMENT CENTER - NORTHRIDGE Record ID: 190085HN
Legal Name: TARZANA TREATMENT CENTER, INC.

Address: 18549 ROSCOE BOULEVARD
City, State: NORTHRIDGE, CA 91234
Record ID: 190085HN
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (818)996-1051

Program Name: TARZANA TREATMENT CENTER YOUTH SERVICES - LANCASTER
Legal Name: TARZANA TREATMENT CENTER, INC.
Address: 44443 NORTH TENTH STREET WEST
City, State: LANCASTER, CA 93535Record ID: 190085JN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)726-2630

Program Name:TARZANA TREATMENT CENTERRecord ID:190085KNLegal Name:TARZANA TREATMENT CENTER, INC.Service Type:NONAddress:7101 BAIRD AVENUEResident Capacity:0City, State:RESEDA, CA 91335-Total Occupancy:0

Phone #: (818)996-1051

Program Name:TARZANA TREATMENT CENTERS, INC.Record ID:190085NNLegal Name:TARZANA TREATMENT CENTERS, INC.Service Type:NONAddress:5190 ATLANTIC AVENUEResident Capacity:0City, State:LONG BEACH, CA 90806-Total Occupancy:0

Phone #: (818)996-1051

Program Name: TARZANA TREATMENT CENTERS Record ID: 190085ON Legal Name: TARZANA TREATMENT CENTERS, INC. Service Type: NON Address: 907 WEST LANCASTER BOULEVARD, 2ND FLOOR Resident Capacity: 0
City, State: LANCASTER, CA 93534- Total Occupancy: 0

Phone #: (661)726-2630

Program Name: TEAM ONE STOP DRUG & ALCOHOL--OUTPATIENT SERVICES Record ID: 190367AN

Legal Name:TEAM ONE STOPService Type:NONAddress:5115 WEST ADAMS BOULEVARDResident Capacity:0City, State:LOS ANGELES, CA 90016-Total Occupancy:0

Phone #: (323)933-4391

As of: 04/06/2005 Los Angeles County

Program Name: LIGHTHOUSE Record ID: 190006BN
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO Service Type: RES
Address: 126-134 WEST 10TH STREET Resident Capacity: 18
City, State: SAN PEDRO, CA 90731 Total Occupancy: 18

Phone #: (310)514-4940

Program Name: PALOS VERDES HOUSE Record ID: 190006DN

Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO

Address: 1012 SOUTH PALOS VERDES STREET

City, State: SAN PEDRO, CA 90731

Total Occupancy: 25

Phone #: (310)514-4940

Program Name: CHANNEL VIEW HOUSE Record ID: 190006EN

Legal Name:THE BEACON HOUSE ASSOCIATION OF SAN PEDROService Type:RESAddress:124 WEST 11TH STREETResident Capacity:27City, State:SAN PEDRO, CA 90731Total Occupancy:27

Phone #: (310)514-4940

Program Name: BEACON HOUSE Record ID: 190006AN

Legal Name:THE BEACON HOUSE ASSOCIATION OF SAN PEDROService Type:RESAddress:1003 SOUTH BEACON STREETResident Capacity:18City, State:SAN PEDRO, CA 90731Total Occupancy:18

Phone #: (310)514-4940

Program Name: THE BISHOP GOODEN HOME Record ID: 190009AN Legal Name: THE BISHOP GOODEN HOME Service Type: RES

Address: 191 NORTH EL MOLINO AVENUE Resident Capacity: 26

Total Occupancy: 26

City, State: PASADENA, CA 91101

Phone #: (626)356-0078

Program Name: THE CANYON AT PEACE PARK

Legal Name: THE CANYON AT PEACE PARK

Service Type: DETOX

Address: 2890 KANAN DUME ROAD

Resident Capacity: 6

Address: 2890 KANAN DUME ROAD

City, State: MALIBU, CA 90265Phone #: (888)922-6966

Resident Capacity: 6

Total Occupancy: 6

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Program Name: THE CANYON AT PEACE PARK
Legal Name: THE CANYON AT PEACE PARK
Address: 2900 KANAN DUME ROAD
City, State: MALIBU, CA 90265Resident Capacity: 6
Total Occupancy: 6

Phone #: (888)922-6966

Program Name: THE CENTER FOR HOPE, INC.

Legal Name: THE CENTER FOR HOPE, INC.

Address: 5012 SOUTH LA BREA AVENUE

Record ID: 190398AN

Service Type: NON

Resident Capacity: 0

City, State: LOS ANGELES, CA 90056- Total Occupancy: 0

Phone #: (310)462-7942

As of: 04/06/2005 Los Angeles County

Program Name: H.O.W. HOUSE Record ID: 190450CN
Legal Name: THE CENTER FOR RECOVERY FROM COMPULSIVITIES, INC.
Address: 14100 1/4 GLENGYLE STREET Resident Capacity: 6
City, State: WHITTIER, CA 90604-2434
Total Occupancy: 6

Phone #: (562)777-1222

Program Name: H.O.W. HOUSE Record ID: 190450BN

Legal Name: THE CENTER FOR RECOVERY FROM COMPULSIVITIES, INC.

Address: 14100 1/2 GLENGYLE STREET

City, State: WHITTIER, CA 90604-2434

Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (562)777-1222

Program Name: H.O.W. HOUSE Record ID: 190450AN

Legal Name: THE CENTER FOR RECOVERY FROM COMPULSIVITIES, INC.

Address: 14100 GLENGYLE STREET

City, State: WHITTIER, CA 90604-2434

Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (562)777-1222

Program Name: THE DISCOVERY PROGRAM
Legal Name: THE DISCOVERY PROGRAM, INC.

Record ID: 190330AP
Service Type: RES-DETOX

Address: 1831 BENECIA AVENUE Resident Capacity: 6
City, State: LOS ANGELES, CA 90025- Total Occupancy: 6

Phone #: (310)843-0246

Program Name: THE DISCOVERY PROGRAM
Legal Name: THE DISCOVERY PROGRAM, INC.
Record ID: 190330BP
Service Type: RES-DETOX

Address: 1833 BENECIA AVENUE Resident Capacity: 6
City, State: LOS ANGELES, CA 90025- Total Occupancy: 6

Phone #: (310)843-0246

Program Name: THE GUIDANCE CENTER - COMPTON OFFICE Record ID: 190245FN

Legal Name:THE GUIDANCE CENTERService Type:NONAddress:369 WEST COMPTON BOULEVARDResident Capacity:0City, State:COMPTON, CA 90220-3110Total Occupancy:0

Phone #: (310)669-9510

Program Name: THE GUIDANCE CENTER - AVALON CLINIC Record ID: 190245HN

Legal Name: THE GUIDANCE CENTER

Address: 125 METROPOLE AVENUE

City, State: AVALON, CA 90704
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (310)510-7500

Program Name: THE GUIDANCE CENTER Record ID: 190245GN
Legal Name: THE GUIDANCE CENTER Service Type: NON

Address: 3711 LONG BEACH BOULEVARD, SUITE 600 Resident Capacity: 0
City, State: LONG BEACH, CA 90807-3319 Total Occupancy: 0

Phone #: (562)595-1159

As of: 04/06/2005 Los Angeles County

Program Name:THE HIGH ROAD PROGRAMRecord ID:190262BNLegal Name:THE HIGH ROAD PROGRAMService Type:NONAddress:14430 SHERMAN WAYResident Capacity:0City, State:VAN NUYS, CA 91405-Total Occupancy:0

Phone #: (818)785-9119

Program Name: THE HIGH ROAD PROGRAM
Legal Name: THE HIGH ROAD PROGRAM
Address: 44823 DATE AVENUE
City, State: LANCASTER, CA 93534
Record ID: 190262CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (661)942-2241

Program Name: THE HIGH ROAD PROGRAM
Legal Name: THE HIGH ROAD PROGRAM
Address: 700 SOUTH ARROYO PARKWAY
City, State: PASADENA, CA 91105Record ID: 190262AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (626)793-6159

Program Name: BRICKS/KICK Record ID: 190102AN

Legal Name:THE HILLSMAN DRUG AND ALCOHOL CENTERService Type:RESAddress:1440 EAST 41ST STREETResident Capacity:42City, State:LOS ANGELES, CA 90011Total Occupancy:42

Phone #: (323)231-2585

Program Name: MINI TWELVE STEP HOUSE Record ID: 190036AN

Legal Name:THE MINI TWELVE STEP HOUSE, INCORPORATEDService Type:RESAddress:303 EAST 52ND STREETResident Capacity:28City, State:LOS ANGELES, CA 90011Total Occupancy:28

Phone #: (323)295-6604

Program Name: THE SOLUTION FAMILY RESOURCE CENTER Record ID: 190036CN
Legal Name: THE MINI TWELVE STEP HOUSE, INCORPORATED Service Type: NON
Address: 200 NORTH LONG BEACH BOULEVARD Resident Capacity: 0

City, State: COMPTON, CA 90221
Total Occupancy: 0

Phone #: (323)295-6604

Program Name: UNIVERSITY MINI HOUSE Record ID: 190036BN

Legal Name:THE MINI TWELVE STEP HOUSE, INCORPORATEDService Type:RESAddress:1145 WEST 37TH PLACEResident Capacity:11City, State:LOS ANGELES, CA 90007Total Occupancy:11

Phone #: (323)295-6604

Program Name: THE NESS COUNSELING CENTER Record ID: 190286AN Legal Name: THE NESS COUNSELING CENTER, INC. Service Type: NON

egal Name: THE NESS COUNSELING CENTER, INC.

Address: 8512 WHITWORTH DRIVE

City, State: LOS ANGELES, CA 90035
Total Occupancy: 0

Phone #: (310)360-8512

As of: 04/06/2005 Los Angeles County

Program Name:THE NEW DESTINY, INC.Record ID:190451ANLegal Name:THE NEW DESTINY, INC.Service Type:NONAddress:155 WEST WASHINGTON BOULEVARD, SUITE 517Resident Capacity:0

Total Occupancy: 0

Phone #: (323)304-0054

City, State: LOS ANGELES, CA 90015-

Program Name: MT. CARMEL TREATMENT CENTER Record ID: 190248AN Legal Name: THE PALMS RESIDENTIAL CARE FACILITY Service Type: RES

Address: 801 WEST 70TH STREET Resident Capacity: 30

City, State: LOS ANGELES, CA 90044- Total Occupancy: 30

Phone #: (323)759-0340

Program Name: MILESTONES RANCH MALIBU Record ID: 190328DP Legal Name: THE RANCH - MALIBU CALIFORNIA, LLC Service Type: RES

Address: 200 VERA CANYON ROAD Resident Capacity: 6
City, State: MALIBU, CA 90265- Total Occupancy: 6

Phone #: (818)879-9110

Program Name: MILESTONES RANCH MALIBU Record ID: 190328FP
Legal Name: THE RANCH - MALIBU CALIFORNIA, LLC
Address: 221 VERA CANYON ROAD
City, State: MALIBU, CA 90265Total Occupancy: 6

Phone #: (818)879-9110

Program Name: MILESTONES RANCH MALIBU Record ID: 190328EP
Legal Name: THE RANCH - MALIBU CALIFORNIA, LLC
Service Type: RES
Address: 203 VERA CANYON ROAD Resident Capacity: 6

Address: 203 VERA CANYON ROAD Resident Capacity: 6
City, State: MALIBU, CA 90265- Total Occupancy: 6

Phone #: (818)879-9110

Program Name: THE ROAD TO RECOVERY
Legal Name: THE ROAD TO RECOVERY, INC.
Address: 1712 WEST 49TH STREET
City, State: LOS ANGELES, CA 90062
Record ID: 190217AN
Service Type: RES
Resident Capacity: 16

Phone #: (323)291-6240

Program Name: HARBOR LIGHT CENTER (MALE)/SAFE HARBOR (FEMALE)

Legal Name: THE SALVATION ARMY

Record ID: 190023AN

Service Type: RES-DETOX

Legal Name: THE SALVATION ARMY

Address: 809 & 721 EAST FIFTH STREET

City, State: LOS ANGELES, CA 90013

Service Type: RES-D

Resident Capacity: 286

Total Occupancy: 286

Phone #: (213)626-4786

Program Name: HARMONY HALL
Legal Name: THE SALVATION ARMY
Address: 3107 SOUTH GRAND AVENUE
City, State: LOS ANGELES, CA 90007Record ID: 190023FN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (213)748-0391

As of: 04/06/2005 Los Angeles County

Program Name: HARBOR LIGHT CENTER (MALE)/SAFE HARBOR (FEMALE)

Legal Name: THE SALVATION ARMY

Record ID: 190023EN

Service Type: NON

Address: 809 AND 721 EAST FIFTH STREET

City, State: LOS ANGELES, CA 90013
Total Occupancy: 0

Phone #: (213)626-4786

Program Name: THE SALVATION ARMY HAVEN Record ID: 190023DN

Legal Name: THE SALVATION ARMY

Address: 11301 WILSHIRE BOULEVARD, SUITE 212, SECOND FLOOR
City, State: LOS ANGELES, CA 90073

Service Type: RES
Resident Capacity: 65
Total Occupancy: 65

Phone #: (310)478-3711

Program Name: THE SALVATION ARMY BELL SHELTER--WELLNESS CENTER Record ID: 190023CN

Legal Name: THE SALVATION ARMY

Address: 5600 RICKENBACKER ROAD, BUILDING 2A-B

City, State: BELL, CA 90201

Total Occupancy: 128

Phone #: (323)263-1206

Program Name: HARMONY HALL Record ID: 190023BN

Legal Name:THE SALVATION ARMYService Type:RESAddress:3107 SOUTH GRAND AVENUEResident Capacity:65City, State:LOS ANGELES, CA 90007-3816Total Occupancy:65

Phone #: (213)626-4786

Program Name: SHIELDS NON-RESIDENTIAL ADOLESCENT TREATMENT PROGRAM Record ID: 190238AN

Legal Name:THE SHIELDS FOR FAMILIES PROJECTService Type:NONAddress:12714 SOUTH AVALON BOULEVARD, SUITE 100Resident Capacity:0City, State:LOS ANGELES, CA 90061-Total Occupancy:0

Phone #: (323)242-5000

Program Name: EXODUS FAMILY DAY TREATMENT PROGRAM Record ID: 190238EN

Legal Name: THE SHIELDS FOR FAMILIES PROJECT

Address: 1500 EAST KAY STREET, UNITS (SEE COMMENTS SECTION)

City, State: COMPTON, CA 90221
Total Occupancy: 0

Phone #: (310)898-2450

Program Name: EDEN DUAL DIAGNOSIS PROGRAM
Legal Name: THE SHIELDS FOR FAMILIES PROJECT
Record ID: 190238FN
Service Type: NON

Legal Name: THE SHIELDS FOR FAMILIES PROJECT

Address: 12714 SOUTH AVALON BOULEVARD

City, State: LOS ANGELES, CA 90061
Service Type: NO?

Resident Capacity: 0

Total Occupancy: 0

Phone #: (323)242-5000

Program Name: ARK OUTPATIENT DRUG FREE SERVICES/DRUG COURT Record ID: 190238CN

Legal Name:THE SHIELDS FOR FAMILIES PROJECTService Type:NONAddress:11705 DEPUTY YAMAMOTO PLACE, SUITE AResident Capacity:0City, State:LYNWOOD, CA 90262-Total Occupancy:0

Phone #: (323)357-6930

Los Angeles County As of: 04/06/2005

Program Name: GENESIS FAMILY DAY TREATMENT PROGRAM Record ID: 190238DN Legal Name: THE SHIELDS FOR FAMILIES PROJECT Service Type: NON Resident Capacity: 0 Address: 12021 SOUTH WILMINGTON AVENUE, LOT C Total Occupancy: 0 City, State: LOS ANGELES, CA 90059-

Phone #: (310)668-8260

Program Name: WOMEN'S ODYSSEY ORGANIZATION Record ID: 190151AN Legal Name: THE WOMEN'S ODYSSEY ORGANIZATION, INC. Service Type: RES Resident Capacity: 10 Address: 20830 PARTHENIA STREET Total Occupancy: 10 City, State: CANOGA PARK, CA 91306

Phone #: (818)998-8972

Program Name: TOTAL FAMILY SUPPORT CLINIC Record ID: 190366AN Service Type: NON Legal Name: TOTAL FAMILY SUPPORT CLINIC Resident Capacity: 0 Address: 13741 FOOTHILL BOULEVARD, #240 City, State: SYLMAR, CA 91342-Total Occupancy: 0

Phone #: (818)833-9789

Program Name: TRIDENT QUEST FOUNDATION Record ID: 190317AN Service Type: NON Legal Name: TRIDENT QUEST FOUNDATION Address: 6955 LA TIJERA BOULEVARD, SUITE B Resident Capacity: 0 City, State: LOS ANGELES, CA 90045-Total Occupancy: 0

Phone #: (310)375-3757

Record ID: 190290BP Program Name: TWIN TOWN TREATMENT CENTERS - NORTH HOLLYWOOD Service Type: NON Legal Name: TWIN TOWN CORPORATION Address: 6180 LAUREL CANYON BOULEVARD, SUITE 275 Resident Capacity: 0 Total Occupancy: 0 City, State: NORTH HOLLYWOOD, CA 91606-

Phone #: (818)985-0560

Program Name: TWIN TOWN TREATMENT CENTERS - TORRANCE Record ID: 190290AP Service Type: NON Legal Name: TWIN TOWN CORPORATION Address: 2171 TORRANCE BOULEVARD, SUITES 8 AND 9 Resident Capacity: 0 City, State: TORRANCE, CA 90501-Total Occupancy: 0

Phone #: (310)787-1335

Record ID: 190455AN Program Name: U-TURN ALCOHOL AND DRUG EDUCATION PROGRAM Legal Name: U-TURN ALCOHOL AND DRUG EDUCATION PROGRAM, INC. Service Type: NON Address: 3761 WEST STOCKER STREET, SUITE 105 Resident Capacity: 0 Total Occupancy: 0 City, State: LOS ANGELES, CA 90008-

Phone #: (323)294-4261

Record ID: 190364AN Program Name: ROBERT SUNDANCE FAMILY WELLNESS CENTER Legal Name: UNITED AMERICAN INDIAN INVOLVEMENT, INC. Service Type: NON Address: 1125 WEST 6TH STREET, SUITES 100, 103, 303, AND BASEMENT Resident Capacity: 0 Total Occupancy: 0

City, State: LOS ANGELES, CA 90017-

Phone #: (213)202-3970

As of: 04/06/2005 Los Angeles County

Program Name: WESTSIDE RESIDENCE HALL
Legal Name: UNITED STATES VETERANS INITIATIVE
Address: 733 SOUTH HINDRY AVE., ROOMS 202-205, 207-211, 301-304, 507, Resident Capacity: 150
City, State: INGLEWOOD, CA 90301
Total Occupancy: 150

Phone #: (310)348-7600

Program Name: VILLAGES AT CABRILLO - VETERANS IN PROGRESS PROGRAM
Legal Name: UNITED STATES VETERANS INITIATIVE
Address: 2120 AND 2160 WILLIAMS STREET
City, State: LONG BEACH, CA 90810Record ID: 190188BN
Service Type: RES
Resident Capacity: 95
Total Occupancy: 95

Phone #: (562)388-7982

Program Name: UNITED WOMEN IN TRANSITION
Legal Name: UNITED WOMEN IN TRANSITION
Address: 5001 SOUTH BUDLONG AVENUE
City, State: LOS ANGELES, CA 90037
Record ID: 190175AN
Service Type: RES
Resident Capacity: 10

Phone #: (323)291-5818

Program Name: VALLEY COMMUNITY CLINIC DRUG AND ALCOHOL TREATMENT PF Record ID: 190349AN Legal Name: VALLEY COMMUNITY CLINIC Service Type: NON Address: 6801 COLDWATER CANYON AVENUE Resident Capacity: 0 City, State: LOS ANGELES, CA 91605-5104 Total Occupancy: 0

Phone #: (818)763-1718

Program Name: VAN NESS RECOVERY HOUSE Record ID: 190111AN Legal Name: VAN NESS RECOVERY HOUSE Service Type: RES

Address: 1919 NORTH BEACHWOOD DRIVE Resident Capacity: 20
City, State: LOS ANGELES, CA 90068 Total Occupancy: 20

Phone #: (323)463-4266

Program Name: VERDUGO MENTAL HEALTH, POSITIVE DIRECTIONS COMMUNITY C
Legal Name: VERDUGO MENTAL HEALTH
Address: 225-D NORTH MARYLAND AVENUE
City, State: GLENDALE, CA 91206
Record ID: 190292AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (818)247-8180

Program Name: VOLUNTEERS OF AMERICA SCREENING AND EVALUATION
Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES

Record ID: 190027DN
Service Type: RES-DETOX

Address: 541 SOUTH CROCKER STREET Resident Capacity: 16
City, State: LOS ANGELES, CA 90021 Total Occupancy: 20

Phone #: (323)660-8042

Program Name: VOA OF CENTRAL CITY RECOVERY SERVICES
Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES
Address: 515 EAST 6TH STREET, 9TH FLOOR
City, State: LOS ANGELES, CA 90021

Record ID: 190027BN
Service Type: RES
Resident Capacity: 48
Total Occupancy: 48

Phone #: (323)660-8042

As of: 04/06/2005 Los Angeles County

Program Name: VS-21 Record ID: 190027FN
Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES
Address: 622 SOUTH WALL STREET, BUILDING C
City, State: LOS ANGELES, CA 90014Record ID: 190027FN
Service Type: RES
Resident Capacity: 80
Total Occupancy: 80

Phone #: (213)623-8580

Program Name: JAN CLAYTON CENTER Record ID: 190027AN Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES Service Type: RES

Address: 4969 SUNSET BOULEVARD Resident Capacity: 52

City, State: LOS ANGELES, CA 90027 Total Occupancy: 52

Phone #: (323)660-8042

Program Name: WALDEN HOUSE - TRANSITIONAL TREATMENT CENTER OUTPATIEN Record ID: 190221BN Legal Name: WALDEN HOUSE, INC. Service Type: NON Address: 145 WEST 22ND STREET, 1ST FLOOR Resident Capacity: 0 City, State: LOS ANGELES, CA 90007- Total Occupancy: 0

Phone #: (213)746-3963

Program Name: WALDEN HOUSE TRANSITIONAL TREATMENT CENTER
Legal Name: WALDEN HOUSE, INC.
Address: 1355 SOUTH HILL STREET
City, State: LOS ANGELES, CA 90015Record ID: 190221AN
Service Type: RES
Resident Capacity: 72
Total Occupancy: 72

Phone #: (415)355-2504

Program Name: WALDEN HOUSE FEMALE OFFENDER TREATMENT AND EMPLOYME Record ID: 190221CN Legal Name: WALDEN HOUSE, INC. Service Type: RES

Address: 12423 DAHLIA AVENUE Resident Capacity: 72
City, State: EL MONTE, CA 91732- Total Occupancy: 92

Phone #: (626)444-9094

Program Name:HOUSE OF UHURURecord ID:190377BNLegal Name:WATTS HEALTHCARE CORPORATIONService Type:NONAddress:8005 SOUTH FIGUEROA STREETResident Capacity:0City, State:LOS ANGELES, CA 90003-Total Occupancy:0

Phone #: (323)778-5290

Program Name: HOUSE OF UHURU

Legal Name: WATTS HEALTHCARE CORPORATION--THE HOUSE OF UHURU

Address: 8005 SOUTH FIGUEROA STREET

City, State: LOS ANGELES, CA 90003
Record ID: 190377AN

Service Type: RES

Resident Capacity: 66

Total Occupancy: 66

Phone #: (323)778-5290

Program Name: STAIRS PROGRAM
Legal Name: WEINGART CENTER ASSOCIATION
Address: 566 SOUTH SAN PEDRO STREET
City, State: LOS ANGELES, CA 90013
Record ID: 190181AN
Service Type: RES
Resident Capacity: 142
Total Occupancy: 142

Phone #: (213)627-9000

As of: 04/06/2005 Los Angeles County

Program Name: PROMISES RESIDENTIAL TREATMENT CENTERS Record ID: 190074AP

Legal Name: WESTSIDE SOBER LIVING CENTERS, INC. Service Type: RES-DETOX

Address: 3743 1/2 SOUTH BARRINGTON AVENUE Resident Capacity: 6
City, State: LOS ANGELES, CA 90066 Total Occupancy: 6

Phone #: (310)390-2340

Program Name: PROMISES RESIDENTIAL TREATMENT CENTER Record ID: 190074FP
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC. Service Type: RES-DETOX

Address: 20725 ROCKCROFT DRIVE

City, State: MALIBU, CA 90265

Resident Capacity: 6

Total Occupancy: 6

Phone #: (310)317-9233

Program Name: PROMISES RESIDENTIAL TREATMENT CENTER Record ID: 190074JP

Legal Name: WESTSIDE SOBER LIVING CENTERS, INC. Service Type: RES-DETOX

Address: 3744 SOUTH BARRINGTON AVENUE

City, State: LOS ANGELES, CA 90066
Total Occupancy: 6

Phone #: (310)390-2340

Program Name: PROMISES MALIBU - COOL OAK Record ID: 190074IP

Legal Name: WESTSIDE SOBER LIVING CENTERS, INC. Service Type: RES-DETOX

Address: 20786 COOL OAK WAY

City, State: MALIBU, CA 90265
Total Occupancy: 6

Phone #: (310)456-8422

Program Name: WINGS OF RECOVERY - NONRESIDENTIAL Record ID: 190434AN

Legal Name: WINGS OF REFUGE

Service Type: NON
Address: 5777 WEST CENTURY SHITE 900

Resident Capacity: 0

Address: 5777 WEST CENTURY, SUITE 900 Resident Capacity: 0
City, State: LOS ANGELES, CA 90045- Total Occupancy: 0

Phone #: (310)570-6767

Program Name: WINGS OF RECOVERY RESIDENTIAL II Record ID: 190434CN

Legal Name: WINGS OF REFUGE

Address: 19422 RADLETTE AVENUE

City, State: CARSON, CA 90746
Total Occupancy: 10

Phone #: (310)670-6767

Program Name: WORKING ALTERNATIVES, CCRC Record ID: 190183CP

Legal Name:WORKING ALTERNATIVES, INC.Service Type:Address:4026 WEST CENTURY BOULEVARDResident Capacity:0City, State:LOS ANGELES, CA 90304-1622Total Occupancy:0

Phone #: (310)671-3629

As of: 04/06/2005 *Madera County*

Program Name: CORNERSTONE FAMILY COUNSELING Record ID: 200008AN Legal Name: CORNERSTONE FAMILY COUNSELING Service Type: NON Address: 49346 ROAD 426, SUITE 1 Resident Capacity: 0 City, State: OAKHURST, CA 93644- Total Occupancy: 0

Phone #: (559)641-6321

Program Name: HEALTH CARE DUAL DIAGNOSIS CLINICS II Record ID: 200006AP Legal Name: DEVELOPMENT SPECIALTY PROJECTS, INC., DBA HEALTH CARE DU Service Type: NON Address: 805 HUMBOLDT Resident Capacity: 0
City, State: CHOWCHILLA, CA 93610- Total Occupancy: 0

Phone #: (559)352-1185

Program Name: FAMILY DUAL DIAGNOSIS TREATMENT PROGRAMS
Legal Name: FAMILY DUAL DIAGNOSIS TREATMENT PROGRAMS
Address: 285 HOSPITAL DRIVE
City, State: CHOWCHILLA, CA 93610
Record ID: 200004AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)275-1281

Program Name: MADERA COUNTY CHOWCHILLA COUNSELING CENTER
Legal Name: MADERA COUNTY BEHAVIORAL HEALTH SERVICES
Address: 1200 VENTURA
City, State: CHOWCHILLA, CA 93610Record ID: 200005CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)665-2947

Program Name: MADERA COUNTY MADERA COUNSELING CENTER
Legal Name: MADERA COUNTY BEHAVIORAL HEALTH SERVICES
Address: 14227 ROAD 28
City, State: MADERA, CA 93638Record ID: 200005DN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)675-7921

Program Name: MADERA COUNTY YOSEMITE WOMEN'S COUNSELING CENTER
Legal Name: MADERA COUNTY BEHAVIORAL HEALTH SERVICES
Address: 424 NORTH GATEWAY DRIVE
City, State: MADERA, CA 93637-3142
Record ID: 200005EN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)675-7762

Program Name: MADERA COUNTY SUPERVISION AND TREATMENT PROGRAM
Legal Name: MADERA COUNTY BEHAVIORAL HEALTH SERVICES

Record ID: 200005BN
Service Type: NON

Address: 450 MADERA AVENUE, SUITE H

City, State: MADERA, CA 93637
Total Occupancy: 0

Phone #: (559)675-4515

Program Name: MADERA COUNTY OAKHURST COUNSELING CENTER
Legal Name: MADERA COUNTY BEHAVIORAL HEALTH SERVICES
Address: 49774 ROAD 426, SUITE D
City, State: OAKHURST, CA 93644Record ID: 200005AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)683-4809

Marin County As of: 04/06/2005

Program Name: MARIN CITY RECOVERY CENTER Record ID: 210020AN Legal Name: BAY AREA COMMUNITY RESOURCES Service Type: NON Resident Capacity: 0 Address: 630 DRAKE AVENUE Total Occupancy: 0 City, State: MARIN CITY, CA 94965-

Phone #: (415)339-2851

Program Name: BAYSIDE MARIN I Record ID: 210021BP Legal Name: BAYSIDE HEALTH SERVICES, INC. Service Type: RES

Address: 191 BAYVIEW DRIVE Resident Capacity: 6 Total Occupancy: 17 City, State: SAN RAFAEL, CA 94901-

Phone #: (415)459-2000

Program Name: BAYSIDE MARIN II Record ID: 210021AP

Service Type: RES Legal Name: BAYSIDE HEALTH SERVICES, INC. Resident Capacity: 6 Address: 189 BAYVIEW DRIVE City, State: SAN RAFAEL, CA 94901-Total Occupancy: 10

Phone #: (415)459-2000

Program Name: BAYSIDE MARIN OUTPATIENT PROGRAM Record ID: 210021CP Service Type: NON Legal Name: BAYSIDE HEALTH SERVICES, INC.

Address: 684 POINT SAN PEDRO ROAD Resident Capacity: 0 Total Occupancy: 0 City, State: SAN RAFAEL, CA 94901-

Phone #: (415)459-2000

Record ID: 210019AN Program Name: BUCKELEW PROGRAMS (LINDA REED DAY SERVICES)

Service Type: NON Legal Name: BUCKELEW PROGRAMS

Address: 1000 SIR FRANCIS DRAKE BOULEVARD Resident Capacity: 0 Total Occupancy: 0 City, State: SAN ANSELMO, CA 94960-

Phone #: (415)456-9350

Program Name: CENTER POINT - THE MANOR Record ID: 210002BN

Service Type: RES Legal Name: CENTER POINT, INC. Address: 603 D STREET Resident Capacity: 40 Total Occupancy: 40 City, State: SAN RAFAEL, CA 94901

Phone #: (415)454-9444

Record ID: 210002FN Program Name: THE VILLAGE

Legal Name: CENTER POINT, INC. Service Type: RES Address: 1477-1483 LINCOLN AVENUE Resident Capacity: 44 Total Occupancy: 44 City, State: SAN RAFAEL, CA 94901

Phone #: (415)454-9444

Record ID: 210002HN Program Name: CENTER POINT ADOLESCENT PROGRAM

Service Type: DSS Legal Name: CENTER POINT, INC. Address: 812 D STREET Resident Capacity: 0

City, State: SAN RAFAEL, CA 94901-Total Occupancy: 0

Phone #: (415)454-2413

As of: 04/06/2005 *Marin County*

Program Name: CENTER POINT LIFELINK PROGRAM
Legal Name: CENTER POINT, INC.
Address: 39 MARY STREET
City, State: SAN RAFAEL, CA 94901Phone #: (415)456-6655

Program Name: CENTER POINT LIFELINK PROGRAM
Legal Name: CENTER POINT LIFELINK PROGRAM
Legal Name: CENTER POINT, INC.
Service Type: RES
Address: 510 RELLE STREET.

Legal Name:CENTER POINT, INC.Service Type:RESAddress:519 BELLE STREETResident Capacity:12City, State:SAN RAFAEL, CA 94901-Total Occupancy:12

Phone #: (415)454-7777

Program Name: CENTER POINT RESIDENTIAL PROGRAM

Legal Name: CENTER POINT, INC.

Address: 207 1ST STREET

Resident Capacity: 8

Text 1 Our garage 8

City, State: SAN RAFAEL, CA 94901- Total Occupancy: 8

Phone #: (415)454-9444

Program Name: CENTER POINT OUTPATIENT SERVICES Record ID: 210002GN
Legal Name: CENTER POINT, INC. Service Type: NON
Address: 1601 SECOND STREET, SUITE 104 Resident Capacity: 0

Address: 1601 SECOND STREET, SUITE 104 Resident Capacity: 0
City, State: SAN RAFAEL, CA 94901 Total Occupancy: 0

Phone #: (415)456-6655

Program Name:HELEN VINE DETOX CENTERRecord ID:210017ANLegal Name:COMMUNITY ACTION MARINService Type:DETOXAddress:301 SMITH RANCH ROADResident Capacity:26City, State:SAN RAFAEL, CA 94903-Total Occupancy:26

Phone #: (415)492-0818

Program Name: HENRY OHLHOFF NORTH
Legal Name: HENRY OHLHOFF HOUSE
Address: 5394 NAVE DRIVE
City, State: NOVATO, CA 94949

Record ID: 210012AN
Service Type: RES
Resident Capacity: 30
Total Occupancy: 32

Phone #: (415)883-2494

Program Name: OHLHOFF OUTPATIENT PROGRAM
Legal Name: HENRY OHLHOFF RECOVERY PROGRAMS
Address: 914 IRWIN STREET
City, State: SAN RAFAEL, CA 94901Total Occupancy: 0

Phone #: (415)485-0382

Program Name: MARIN SERVICES FOR WOMEN Record ID: 210004AN Legal Name: MARIN SERVICES FOR WOMEN, INCORPORATED Service Type: NON Address: 1251 SOUTH ELISEO DRIVE Resident Capacity: 0

City, State: GREENBRAE, CA 94904
Total Occupancy: 0

Phone #: (415)924-5995

As of: 04/06/2005 *Marin County*

Program Name: LARKSPUR HOUSE Record ID: 210004CN Legal Name: MARIN SERVICES FOR WOMEN, INCORPORATED Service Type: RES

Address: 1251 SOUTH ELISEO DRIVE Resident Capacity: 40

City, State: GREENBRAE, CA 94904- Total Occupancy: 50

Phone #: (415)924-7080

Program Name:NEW PERSPECTIVESRecord ID:210005BNLegal Name:PREVENTION RESOURCES, INC.Service Type:NONAddress:171 CARLOS DRIVEResident Capacity:0

City, State: SAN RAFAEL, CA 94903
Total Occupancy: 0

Phone #: (415)444-5580

Program Name: SERENITY KNOLLS Record ID: 210011AP
Legal Name: SERENITY KNOLLS Service Type: RES-DETOX

Address: 145 TAMAL ROAD Resident Capacity: 30 City, State: FOREST KNOLLS, CA 94933 Total Occupancy: 32

Phone #: (415)488-1955

Program Name: WEST MARIN COMMUNITY OUTREACH, A PROGRAM OF THE FAMIL Record ID: 210018AN Legal Name: THE FAMILY INSTITUTE OF MARIN Service Type: NON Address: 100 SIXTH STREET Resident Capacity: 0

City, State: POINT REYES STATION, CA 94956- Total Occupancy: 0

Phone #: (415)663-9441

As of: 04/06/2005

Program Name: MARIPOSA COUNTY ALCOHOL AND DRUG SERVICES - KINGS VIEW Record ID: 220001AN Legal Name: KINGS VIEW Service Type: NON Address: 5037 STROMING ROAD, SUITE A Resident Capacity: 0 City, State: MARIPOSA, CA 95338- Total Occupancy: 0

Phone #: (209)966-2000

As of: 04/06/2005 *Mendocino County*

Program Name: FORD STREET PROJECT Record ID: 230004AN
Legal Name: FORD STREET PROJECT Service Type: RES-DETOX

Address: 139 FORD STREET, GUEST HOUSE ONLY
City, State: UKIAH, CA 95482
Resident Capacity: 28
Total Occupancy: 28

Phone #: (707)462-1934

Program Name: MENDOCINO COUNTY DIVISION OF ALCOHOL AND OTHER DRUG PF Record ID: 230006HN Legal Name: MENDOCINO COUNTY DIVISION OF ALCOHOL AND OTHER DRUG PF Service Type: NON

Address: 1120 SOUTH DORA STREET Resident Capacity: 0
City, State: UKIAH, CA 95482- Total Occupancy: 0

Phone #: (707)463-6893

Program Name: MENDOCINO COUNTY DIVISION OF ALCOHOL AND OTHER DRUG PF Record ID: 230006GN Legal Name: MENDOCINO COUNTY DIVISION OF ALCOHOL AND OTHER DRUG PF Service Type: NON

Address: 120 WEST FIR Resident Capacity: 0
City, State: FORT BRAGG, CA 95437- Total Occupancy: 0

Phone #: (707)472-2605

Program Name: MENDOCINO COUNTY DIVISION OF ALCOHOL AND OTHER DRUG PF Record ID: 230006DN Legal Name: MENDOCINO COUNTY DIVISION OF ALCOHOL AND OTHER DRUG PF Service Type: NON

Address: 518 LOW GAP ROAD

City, State: UKIAH, CA 95482
Total Occupancy: 0

Phone #: (707)472-2605

Program Name: MENDOCINO COUNTY DIVISION OF ALCOHOL AND OTHER DRUG PF Legal Name: MENDOCINO COUNTY DIVISION OF ALCOHOL AND OTHER DRUG PF Service Type: NON Address: 221B SOUTH LENORE STREET, RMS 19,22,23,25,25A,27,28,29,31,32 Resident Capacity: 0 City, State: WILLITS, CA 95490- Total Occupancy: 0

Phone #: (707)472-2605

Program Name: YUKI TRAILS HUMAN SERVICE PROGRAM - A DEPARTMENT OF ROL Legal Name: ROUND VALLEY INDIAN HEALTH CENTER, INC. Record ID: 230007AN Service Type: NON

Address: 23000 HENDERSON ROAD Resident Capacity: 0
City, State: COVELO, CA 95428- Total Occupancy: 0

Phone #: (707)983-6648

As of: 04/06/2005 *Merced County*

Program Name: CALIFORNIA MENTAL HEALTH DRUG AND ALCOHOL PROGRAM
Legal Name: CALIFORNIA MENTAL HEALTH, INC.

Record ID: 240005AP
Service Type: NON

Address: 2202 BLOSSOM Resident Capacity: 0
City, State: DOS PALOS, CA 93620- Total Occupancy: 0

Phone #: (559)455-9400

Program Name: DAVE RIORDAN'S "HOBIE HOUSE" Record ID: 240001BN
Legal Name: COMMUNITY/SOCIAL MODEL ADVOCATES, INC. Service Type: RES-DETOX

Address: 1299 AND 1301 YOSEMITE PARKWAY, 1931 AND 1941 HIGHLAND Resident Capacity: 25 City, State: MERCED, CA 95340 Total Occupancy: 26

Phone #: (209)722-6335

Program Name: THE ROSE JULIA RIORDAN TRANQUILITY VILLAGE
Legal Name: COMMUNITY/SOCIAL MODEL ADVOCATES, INC.
Address: 559 MENDOCINO COURT
City, State: ATWATER, CA 95301
Record ID: 240001EN
Service Type: RES
Total Occupancy: 66

Phone #: (209)722-6377

Program Name: THE CENTER Record ID: 240003BN

Legal Name: MERCED COUNTY (DEPARTMENT OF MENTAL HEALTH - ALCOHOL. Service Type: NON

Address: 658 WEST MAIN STREET Resident Capacity: 0
City, State: MERCED, CA 95340- Total Occupancy: 0

Phone #: (209)381-6880

Program Name: RECOVERY ASSISTANCE FOR TEENS (R.A.F.T.) Record ID: 240003AN

Legal Name: MERCED COUNTY DEPARTMENT OF MENTAL HEALTH - ALCOHOL A Service Type: NON Address: 3345 M STREET Resident Capacity: 0

City, State: MERCED, CA 95348- Total Occupancy: 0

Phone #: (209)381-6860

Program Name: MERCED COUNTY SACPA DRUG TREATMENT PROGRAM Record ID: 240003CN

Legal Name: MERCED COUNTY DEPARTMENT OF MENTAL HEALTH ALCOHOL At Service Type: NON Address: 2130 COOPER AVENUE Resident Capacity: 0

City, State: MERCED, CA 95340- Total Occupancy: 0

Phone #: (209)381-6850

As of: 04/06/2005

Program Name: MODOC COUNTY ALCOHOL AND DRUG SERVICES

Legal Name: MODOC COUNTY

Address: 441 NORTH MAIN STREET City, State: ALTURUS, CA 96101-

Phone #: (530)233-6319

Record ID: 250001AN Service Type: NON

Resident Capacity: 0
Total Occupancy: 0

Program Name: MONO COUNTY MANDATED SERVICES PROGRAM Record ID: 260001CN Legal Name: MONO COUNTY ALCOHOL AND DRUG PROGRAMS Service Type: NON Address: 452 OLD MAMMOTH ROAD, THIRD FLOOR SIERRA CENTER MAL City, State: MAMMOTH LAKES, CA 93546- Total Occupancy: 0

Phone #: (760)924-1740

As of: 04/06/2005 *Monterey County*

Program Name: BEACON HOUSE Record ID: 270001AN
Legal Name: BEACON HOUSE Service Type: RES-DETOX

Address: 468 PINE AVENUE Resident Capacity: 17
City, State: PACIFIC GROVE, CA 93950 Total Occupancy: 17

Phone #: (831)372-2334

Program Name: GENESIS RESIDENTIAL CENTER Record ID: 270004AN
Legal Name: COMMUNITY HUMAN SERVICES Service Type: RES-DETOX

Address: 1140, 1146, AND 1152 SONOMA AVENUE Resident Capacity: 36 City, State: SEASIDE, CA 93955 Total Occupancy: 42

Phone #: (831)899-2436

Program Name: NEXT STEP Record ID: 270004BN
Legal Name: COMMUNITY HUMAN SERVICES Service Type: NON

Legal Name: COMMUNITY HUMAN SERVICES

Address: 30 EAST MARKET STREET

City, State: SALINAS, CA 93901
Total Occupancy: 0

Phone #: (831)753-0325

Program Name: DOOR TO HOPE Record ID: 270002AN

Legal Name:DOOR TO HOPEService Type:RESAddress:165 CLAY STREETResident Capacity:14City, State:SALINAS, CA 93901Total Occupancy:14

Phone #: (831)422-6226

Program Name: NUEVA ESPERANZA Record ID: 270002BN

Legal Name:DOOR TO HOPEService Type:RESAddress:325 CALIFORNIA STREETResident Capacity:6City, State:SALINAS, CA 93901-Total Occupancy:16

Phone #: (831)422-2636

Program Name: WEYLAND CONSULTATION SERVICES Record ID: 270015AP

Legal Name: FREDRICK D. WADE AND SHAREEN E. LELAND, D.B.A. WEYLAND CC Service Type: NON Address: 225 EAST ROMIE LANE
City, State: SALINAS, CA 93901Total Occupancy: 0

Phone #: (877)939-5263

Program Name: NEW START RECOVERY HOME FOR WOMEN Record ID: 270016AN

Legal Name:NEW START RECOVERY HOME FOR WOMENService Type:RESAddress:1718 LAGUNA STREETResident Capacity:6City, State:SEASIDE, CA 93955-Total Occupancy:6

Phone #: (831)394-3600

Program Name: SUN STREET CENTER Record ID: 270003AN
Legal Name: SUN STREET CENTERS Service Type: RES-DETOX

Address: 8 SUN STREET Resident Capacity: 54

City, State: SALINAS, CA 93901 Total Occupancy: 54

Phone #: (831)424-0427

As of: 04/06/2005 *Monterey County*

Program Name: SUN STREET CENTERS OUTPATIENT PROGRAM Record ID: 270003BN Legal Name: SUN STREET CENTERS Service Type: NON Address: 517 SOUTH MAIN STREET Resident Capacity: 0

Total Occupancy: 0

Phone #: (831)753-6001

City, State: SALINAS, CA 93901-

Program Name: SUN STREET CENTERS OUTPATIENT PROGRAM Record ID: 270003CN

Legal Name:SUN STREET CENTERSService Type:NONAddress:1760 FREMONT BOULEVARDResident Capacity:0City, State:SEASIDE, CA 93955-Total Occupancy:0

Phone #: (831)753-6001

Program Name: SUN STREET CENTERS OUTPATIENT PROGRAM Record ID: 270003DN

Legal Name:SUN STREET CENTERSService Type:NONAddress:520 BASSETT STREETResident Capacity:0City, State:KING CITY, CA 93930-Total Occupancy:0

Phone #: (831)753-6001

Program Name: SUN STREET CENTERS INTENSIVE OUT-PATIENT PROGRAM Record ID: 270003FN

Legal Name: SUN STREET CENTERS INC.

Service Type: NON
Address: 12 SUN STREET

Resident Capacity: 0

Address: 12 SUN STREET Resident Capacity: 0
City, State: SALINAS, CA 93901- Total Occupancy: 0

Phone #: (831)753-5145

Program Name: TURNING POINT SALINAS RE-ENTRY PROGRAM
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.

Record ID: 270017AN
Service Type: RES

Address: 116 EAST SAN LUIS STREET Resident Capacity: 20
City, State: SALINAS, CA 93901- Total Occupancy: 20

Phone #: (831)422-9171

Program Name: VALLEY HEALTH ASSOCIATES Record ID: 270011BN Legal Name: VALLEY HEALTH ASSOCIATES Service Type: NON Address: 114 WEBSTER STREET Resident Capacity: 0

City, State: MONTEREY, CA 93940
Total Occupancy: 0

Phone #: (831)372-8392

Program Name: VALLEY HEALTH ASSOCIATES Record ID: 270011AN Legal Name: VALLEY HEALTH ASSOCIATES Service Type: NON Address: 338 MONTEREY STREET Resident Capacity: 0

City, State: SALINAS, CA 93901- Total Occupancy: 0

Phone #: (831)424-6655

Program Name: VALLEY HEALTH ASSOCIATES Record ID: 270011CN

Legal Name:VALLEY HEALTH ASSOCIATESService Type:NONAddress:495 EL CAMINO REAL, SUITE KResident Capacity:0City, State:GREENFIELD, CA 93927-Total Occupancy:0

Phone #: (831)674-1795

As of: 04/06/2005 *Napa County*

Program Name: THE WOLFE CENTER
Legal Name: ALDEA, INC.
Address: 2310 FIRST STREET
City, State: NAPA, CA 94559Record ID: 280013AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)255-1855

Program Name: ALTERNATIVES FOR BETTER LIVING
Legal Name: ALTERNATIVES FOR BETTER LIVING
Address: 832 SCHOOL STREET, SUITES 3, 5, AND 6
City, State: NAPA, CA 94559Total Occupancy: 0

Phone #: (707)226-1248

Program Name: ALTERNATIVES FOR BETTER LIVING
Legal Name: ALTERNATIVES FOR BETTER LIVING
Address: 701 SCHOOL STREET

Resident Capacity: 0

Total Occupancy: 0

City, State: NAPA, CA 94559-Phone #: (707)226-1248

Program Name: CRUTCHER'S SERENITY HOUSE Record ID: 280001AP
Legal Name: CRUTCHER, ROBERT L. Service Type: RES-DETOX

Address: 50 HILLCREST DRIVE Resident Capacity: 19
City, State: DEER PARK, CA 94576 Total Occupancy: 19

Phone #: (707)963-3192

Program Name: DUFFY'S MYRTLEDALE
Legal Name: DUFFY'S MYRTLEDALE
Record ID: 280002AP
Service Type: RES-DETOX

Address: 3076 MYRTLEDALE ROAD Resident Capacity: 49
City, State: CALISTOGA, CA 94515 Total Occupancy: 49

Phone #: (707)942-6888

Program Name: NAPA COUNTY ALCOHOL AND DRUG PROGRAMS
Legal Name: NAPA COUNTY HEALTH AND HUMAN SERVICES
Address: 2344 OLD SONOMA ROAD, BUILDINGS C AND J
City, State: NAPA, CA 94559
Record ID: 280003BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)253-4721

Program Name: EVERGREEN HOUSE Record ID: 280006HN

Legal Name:OUR FAMILY CORPORATIONService Type:DSSAddress:NAPA STATE HOSPITAL, D WARDResident Capacity:0City, State:NAPA, CA 94558Total Occupancy:0

Phone #: (707)252-1366

Program Name: MAGNOLIA HOUSE Record ID: 280006IN

Legal Name:OUR FAMILY CORPORATIONService Type:DSSAddress:NAPA STATE HOSPITAL, C WARDResident Capacity:0City, State:NAPA, CA 94558Total Occupancy:0

Phone #: (707)252-1366

Program Name: WOODLAND HOUSE
Legal Name: ST. HELENA HOSPITAL

Address: 5 WOODLAND AVENUE City, State: DEER PARK, CA 94576

Phone #: (707)963-6204

Record ID: 280009AN Service Type: RES Resident Capacity: 13 Total Occupancy: 13

As of: 04/06/2005 Nevada County

Program Name: COMMUNITY RECOVERY RESOURCES Record ID: 290002DN Legal Name: NEVADA COUNTY COUNCIL ON ALCOHOLISM Service Type: NON
Address: 10015 PALISADES DRIVE, SUITE 1 Resident Capacity: 0
City, State: TRUCKEE, CA 96161- Total Occupancy: 0

Phone #: (530)587-5617

Program Name: COMMUNITY RECOVERY RESOURCE Record ID: 290002AN Legal Name: NEVADA COUNTY COUNCIL ON ALCOHOLISM, INCORPORATED Service Type: NON Address: 440 HENDERSON STREET, SUITE C Resident Capacity: 0

Address: 440 HENDERSON STREET, SUITE C Resident Capacity: 0
City, State: GRASS VALLEY, CA 95945- Total Occupancy: 0

Phone #: (530)273-9541

Program Name: HOPE HOUSE Record ID: 290002BN Legal Name: NEVADA COUNTY COUNCIL ON ALCOHOLISM, INCORPORATED Service Type: RES

Address: 303 BENNETT STREET

City, State: GRASS VALLEY, CA 95945
Resident Capacity: 10

Total Occupancy: 16

Phone #: (530)271-1140

Program Name: PROGRESS HOUSE CO-ED
Legal Name: PROGRESS HOUSE, INC.
Address: 145 BOST AVENUE
City, State: NEVADA CITY, CA 95959Record ID: 290006AN
Service Type: RES
Resident Capacity: 19
Total Occupancy: 19

Phone #: (530)265-9045

As of: 04/06/2005 *Orange County*

Program Name:	ABLE TO CHANGE RECOVERY, INC.	Record ID:	300118AP
Legal Name:	ABLE TO CHANGE RECOVERY, INC.	Service Type:	RES
Address:	25612 VIA SOLIS	Resident Capacity:	6
City, State:	SAN JUAN CAPISTRANO, CA 92675-	Total Occupancy:	6

Phone #: (949)929-8214

Program Name: ABLE TO CHANGE RECOVERY, INC.

Legal Name: ABLE TO CHANGE RECOVERY, INC.

Address: 31957 VIRGINIA WAY

City, State: LAGUNA BEACH, CA 92651
Record ID: 300118CP

Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (949)715-1731

Program Name: ABLE TO CHANGE RECOVERY, INC.

Legal Name: ABLE TO CHANGE RECOVERY, INC.

Address: 31882 CAMINO CAPISTRANO, #220

City, State: SAN JUAN CAPISTRANO, CA 92675
Record ID: 300118BP

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (949)493-6800

Program Name: ACTION CONSULTANTS/THERAPY Record ID: 300104AP Legal Name: ACTION CONSULTANTS/THERAPY Service Type: NON
Address: 2545 EAST CHAPMAN AVENUE, SUITE 112 Resident Capacity: 0
City, State: FULLERTON, CA 92831- Total Occupancy: 0

Phone #: (714)449-9982

Program Name: ACTION CONSULTANTS/THERAPY Record ID: 300104BP Legal Name: ACTION CONSULTANTS/THERAPY Service Type: NON
Address: 1670 SANTA ANA AVENUE, SUITE C, F, & N Resident Capacity: 0
City, State: COSTA MESA, CA 92627- Total Occupancy: 0

Phone #: (949)645-7484

Program Name: SEACLIFF RECOVERY CENTER Record ID: 300152AP Legal Name: ADRIENNE STRATTON, DARRYL FUJIHARA, MARC KASSOFF Service Type: RES

Address: 225 7TH STREET Resident Capacity: 16
City, State: HUNTINGTON BEACH, CA 92648- Total Occupancy: 17

Phone #: (714)960-0078

Program Name: CHEMICAL DEPENDENCY INTERVENTION PROGRAM Record ID: 300111AP

Legal Name:ALTA INSTITUTE, INCORPORATEDService Type:NONAddress:524 WEST COMMONWEALTH AVENUE, SUITE KResident Capacity:0City, State:FULLERTON, CA 92832-Total Occupancy:0

Phone #: (714)680-0241

Program Name: CHEMICAL DEPENDENCY INTERVENTION PROGRAM

Record ID: 300111BP

Legal Name:ALTA INSTITUTE, INCORPORATEDService Type:NONAddress:1540 EAST EDINGER AVENUE, SUITE BResident Capacity:0City, State:SANTA ANA, CA 92705-Total Occupancy:0

Phone #: (714)543-7844

As of: 04/06/2005 *Orange County*

Program Name: BREAKAWAY PROGRAM
Legal Name: BREAKAWAY HEALTH CORPORATION
Address: 3151 AIRWAY AVENUE, SUITE D-1
City, State: COSTA MESA, CA 92626
Record ID: 300065AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)957-8229

Program Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION
Legal Name: CALIFORNIA DIVERSION INTERVENTION FOUNDATION
Address: 1095 NORTH MAIN STREET, SUITE B
City, State: ORANGE, CA 92867Total Occupancy: 0

Phone #: (714)633-0502

Program Name: UNIDOS RECOVERY HOME Record ID: 300010AN
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABU Service Type: RES-DETOX

Address: 9842 WEST 13TH STREET Resident Capacity: 45 City, State: GARDEN GROVE, CA 92644 Total Occupancy: 46

Phone #: (714)531-4624

Program Name: CASA ELENA RECOVERY HOME Record ID: 300010BN

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABU Service Type: RES Address: 832 SOUTH ANAHEIM BOULEVARD Resident Capacity: 6 City, State: ANAHEIM, CA 92801 Total Occupancy: 6

Phone #: (714)722-5580

Program Name: LA FAMILIA ALCOHOL AND DRUG SERVICES Record ID: 300010DN Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABU Service Type: NON Address: 1905 NORTH COLLEGE AVENUE Resident Capacity: 0

City, State: SANTA ANA, CA 92701- Total Occupancy: 0

Phone #: (714)479-0120

Program Name: MEN'S HOUSE OF FREEDOM Record ID: 300145AN Legal Name: CELEBRATE FREEDOM OUTREACH, INC. Service Type: RES

Address: 6062 FULLERTON AVENUE, UNITS A-E Resident Capacity: 30

City, State: BUENA PARK, CA 90621- Total Occupancy: 30

Phone #: (714)521-6635

Program Name: ADDICTION TREATMENT CENTER Record ID: 300119EP
Legal Name: CENTER FOR THE TREATMENT OF ADDICTIONS Service Type: NON
Address: 15145 SPRINGDALE AVENUE Resident Capacity: 0
City, State: HUNTINGTON BEACH, CA 92649-1154 Total Occupancy: 0

Phone #: (714)992-1677

Program Name: CHAPMAN HOUSE, INC. Record ID: 300105FP
Legal Name: CHAPMAN HOUSE, INC. Service Type: RES-DETOX

Address: 207 SOUTH ESPLANADE Resident Capacity: 6
City, State: ORANGE, CA 92869- Total Occupancy: 8

Phone #: (714)532-2119

As of: 04/06/2005 *Orange County*

Program Name: THE CHAPMAN HOUSE
Legal Name: CHAPMAN HOUSE, INC.
Record ID: 300105AP
Service Type: RES-DETOX

Address: 3806 EAST ROBERTA DRIVE Resident Capacity: 6
City, State: ORANGE, CA 92869- Total Occupancy: 7

Phone #: (714)288-9779

Program Name: CHAPMAN HOUSE
Legal Name: CHAPMAN HOUSE, INC.
Address: 1412 EAST CHAPMAN AVENUE
City, State: ORANGE, CA 92866Record ID: 300105BP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)288-9779

Program Name: CHAPMAN HOUSE, INCORPORATED
Legal Name: CHAPMAN HOUSE, INCORPORATED
Address: 1815 EAST PALM AND 305 NORTH OAK
City, State: ORANGE, CA 92866
Record ID: 300105DP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8

Phone #: (714)538-9097

Program Name: ADDICTION TREATMENT CENTER Record ID: 300119DP
Legal Name: CHARLES HENRY JOHNSON, D.B.A, CENTER FOR THE TREATMENT C Service Type: NON
Address: 1105 EAST COMMONWEALTH AVENUE, SUITE J Resident Capacity: 0

City, State: FULLERTON, CA 92831- Total Occupancy: 0

Phone #: (714)992-1677

Program Name: ADDICTION TREATMENT CENTER Record ID: 300119BP Legal Name: CHARLES HENRY JOHNSON, D.B.A., CENTER FOR THE TREATMENT (Service Type: NON Address: 12460 EUCLID AVENUE, SUITE 101 Resident Capacity: 0City, State: GARDEN GROVE, CA 92640-Total Occupancy: 0

Phone #: (714)992-1677

Program Name: C.A.R.E. COUNSELING CENTER
Legal Name: CHILD ABUSE RECOVERY ETC.
Address: 1614 EAST 17TH STREET, SUITE D
City, State: SANTA ANA, CA 92701Record ID: 300113BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (717)836-9900

Program Name: COASTAL FAMILY THERAPY SERVICES Record ID: 300103BN Legal Name: COASTAL FAMILY THERAPY SERVICES Service Type: NON

Address: 1101 DOVE STREET SUITE 160 Resident Capacity: 0

City, State: NEWPORT BEACH, CA 92660- Total Occupancy: 0

Phone #: (949)851-5022

Program Name: COLLEGE COMMUNITY SERVICES/CALWORKS (CCS/CW) Record ID: 300106BP
Legal Name: COLLEGE COMMUNITY SERVICES Service Type: NON
Address: 631 SOUTH BROOKHURST STREET, SUITE 106 Resident Capacity: 0
City, State: ANAHEIM, CA 92804- Total Occupancy: 0

Phone #: (714)490-7711

Orange County As of: 04/06/2005

Program Name: COMEBACK RECOVERY Record ID: 300122BP Legal Name: COMEBACK RECOVERY HOUSE Service Type: RES-DETOX

Resident Capacity: 6 Address: 1249 NORTH BROOKHURST STREET Total Occupancy: 6 City, State: ANAHEIM, CA 92801-

Phone #: (714)778-3661

Program Name: COMEBACK HOUSE PRIMARY RECOVERY Record ID: 300122AP

Legal Name: COMEBACK RECOVERY HOUSE Service Type: RES-DETOX

Resident Capacity: 6 Address: 803 SOUTH GILBERT STREET Total Occupancy: 6 City, State: ANAHEIM, CA 92804-

Phone #: (714)229-0800

Program Name: COOPER FELLOWSHIP Record ID: 300029AN

Service Type: RES Legal Name: COOPER FELLOWSHIP, INC. Resident Capacity: 71 Address: 401,405,409,413,417, AND 421 NORTH COOPER STREET City, State: SANTA ANA, CA 92703 Total Occupancy: 71

Phone #: (714)554-1152

Program Name: ALCOHOL AND DRUG ABUSE SERVICES - FULLERTON Record ID: 300006AN

Service Type: NON Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY Address: 211 WEST COMMONWEALTH, SUITE 204 Resident Capacity: 0 Total Occupancy: 0 City, State: FULLERTON, CA 92632

Phone #: (714)834-3602

Record ID: 300006DN Program Name: ALCOHOL AND DRUG ABUSE SERVICES - WESTMINSTER

Service Type: NON Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY Resident Capacity: 0 Address: 14140 BEACH BOULEVARD, ROOM 120 AND 200 Total Occupancy: 0 City, State: WESTMINSTER, CA 92683

Phone #: (714)834-3602

Program Name: ALCOHOL AND DRUG ABUSE SERVICES - NEWPORT/MESA Record ID: 300006IN

Service Type: NON Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY Address: 3115 REDHILL AVENUE Resident Capacity: 0 Total Occupancy: 0 City, State: COSTA MESA, CA 92626

Phone #: (714)834-3602

Record ID: 300006LN Program Name: ALCOHOL AND DRUG ABUSE SERVICES - ANAHEIM Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY Service Type: NON

Address: 2035 BALL ROAD, SUITES 100A AND 100P Resident Capacity: 0 Total Occupancy: 0

City, State: ANAHEIM, CA 92805-

Phone #: (714)934-4670

Record ID: 300006GN Program Name: ALISO VIEJO ALCOHOL & DRUG ABUSE SERVICES Service Type: NON

Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY Address: 5 MAREBLU, SUITE 200 Resident Capacity: 0 City, State: ALISO VIEJO, CA 92656 Total Occupancy: 0

Phone #: (714)834-3602

As of: 04/06/2005 *Orange County*

Program Name: ALCOHOL AND DRUG ABUSE SERVICES - SANTA ANA
Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY
Address: 1200 NORTH MAIN STREET, SUITES 100B AND 301
City, State: SANTA ANA, CA 92701
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)834-3602

Program Name: DIVERSIFIED COUNSELING SERVICES-LAGUNA HILLS Record ID: 300110AP

Legal Name: DIVERSIFIED COUNSELING SERVICES, INC.

Address: 23177 LA CADENA DRIVE, SUITE 103

City, State: LAGUNA HILLS, CA 92653
Total Occupancy: 0

Phone #: (949)455-0744

Program Name: DIVERSIFIED COUNSELING SERVICES-BUENA PARK Record ID: 300110GP

Legal Name: DIVERSIFIED COUNSELING SERVICES, INC.

Address: 6888 LINCOLN BOULEVARD, SUITE D

City, State: BUENA PARK, CA 90620
Total Occupancy: 0

Phone #: (714)758-9920

Program Name: DIVERSIFIED COUNSELING SERVICES-WESTMINSTER Record ID: 300110CP

Legal Name:DIVERSIFIED COUNSELING SERVICES, INC.Service Type:NONAddress:7744 WESTMINSTER BOULEVARD, SUITE AResident Capacity:0City, State:WESTMINSTER, CA 92683-Total Occupancy:0

Phone #: (714)895-0933

Program Name: DIVERSIFIED COUNSELING SERVICES, INC.

Legal Name: DIVERSIFIED COUNSELING SERVICES, INC.

Address: 720 NORTH VALLEY STREET, SUITE J

Record ID: 300110FP

Service Type: NON

Resident Capacity: 0

City, State: ANAHEIM, CA 92801- Total Occupancy: 0

Phone #: (714)758-9920

Program Name:DIVERSIFIED COUNSELING SERVICES, INC.Record ID:300110HPLegal Name:DIVERSIFIED COUNSELING SERVICES, INC.Service Type:NONAddress:1440 EAST 1ST STREET, SUITE 460Resident Capacity:0

City, State: SANTA ANA, CA 92701
Total Occupancy: 0

Phone #: (714)667-1196

Program Name: DREAMS TREATMENT CENTER Record ID: 300140BP Legal Name: DREAMS TREATMENT CENTERS, INC. Service Type: NON
Address: 143 SOUTH CORNELL AVENUE Resident Capacity: 0
City, State: FULLERTON, CA 92831- Total Occupancy: 0

Phone #: (714)526-5887

Program Name: GOLD COAST COUNSELING CENTER, INCORPORATED Record ID: 300138AP

Legal Name: GOLD COAST COUNSELING CENTER, INCORPORATED

Address: 26081 MERIT CIRCLE, SUITE 123

City, State: LAGUNA HILLS, CA 92653
Total Occupancy: 0

Phone #: (949)347-8885

As of: 04/06/2005 *Orange County*

Program Name: CACTUS GARDENS Record ID: 300114AN Legal Name: HALF-WAY HOME, INC. Service Type: RES

Address: 13222 CHAPMAN AVENUE Resident Capacity: 20
City, State: GARDEN GROVE, CA 92650- Total Occupancy: 20

Phone #: (714)703-9492

Program Name: OPPORTUNITY HOUSE Record ID: 300114BN Legal Name: HALF-WAY HOME, INC. Service Type: RES

Address: 13212 CHAPMAN AVENUE Resident Capacity: 20

City, State: GARDEN GROVE, CA 92650- Total Occupancy: 20

Phone #: (714)971-9327

Program Name: ACM RECOVERY, A DIVISION OF HARBOR WOOD SERVICES, INC. Record ID: 300133DN Legal Name: HARBOR WOOD SERVICES, INC. Service Type: NON Address: 14032 ENDERLE CENTER DRIVE, SUITE 214 Resident Capacity: 0 City, State: TUSTIN, CA 92780- Total Occupancy: 0

Phone #: (714)669-9396

Program Name: ACM RECOVERY, A DIVISION OF HARBOR WOOD SERVICES, INC.
Legal Name: HARBOR WOOD SERVICES, INC.
Address: 324 WEST 4TH STREET, SUITE E
City, State: SANTA ANA, CA 92705Record ID: 300133BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)547-1404

Program Name: ACM RECOVERY
Legal Name: HARBOR WOOD SERVICES, INC.
Address: 1820 WEST ORANGEWOOD, SUITE 106
City, State: ORANGE, CA 92868Record ID: 300133AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)978-1090

Program Name: BROOKSIDE INSTITUTE Record ID: 300142AP Legal Name: HEALTHCARE MANAGEMENT COMPANY OF AMERICA, LLC, D.B.A., Service Type: NON Address: 2102 BUSINESS CENTER DRIVE, SUITE 100 Resident Capacity: 0 City, State: IRVINE, CA 92612- Total Occupancy: 0

Phone #: (949)679-7425

Program Name: HOPE BY THE SEA, INC. Record ID: 300149AP Legal Name: HOPE BY THE SEA, INC. Service Type: RES

Address: 23822 STILLWATER LANE Resident Capacity: 6
City, State: LAGUNA NIGUEL, CA 92677- Total Occupancy: 7

Phone #: (949)218-2690

Program Name: HOPE HOUSE
Legal Name: HOPE HOUSE CORPORATION
Address: 710 AND 714 NORTH ANAHEIM BOULEVARD
City, State: ANAHEIM, CA 92805
Record ID: 300034AN
Service Type: RES
Resident Capacity: 56
Total Occupancy: 56

Phone #: (714)776-7490

As of: 04/06/2005 *Orange County*

Program Name: EXPEDITION HOUSE RESIDENTIAL TREATMENT PROGRAM

Record ID: 300124BP

Legal Name: IMPRESA DEVELOPMENT CORPORATION

Address: 1321 WEST DIAMOND STREET, UNIT A

City, State: ANAHEIM, CA 92801
Total Occupancy: 6

Phone #: (714)956-0732

Program Name: EXPEDITION HOUSE RESIDENTIAL TREATMENT PROGRAM Record ID: 300124DP

Legal Name: IMPRESA DEVELOPMENT CORPORATION Service Type: RES
Address: 1300 WEST PEARL STREET Resident Capacity: 24

City, State: ANAHEIM, CA 92804- Total Occupancy: 24

Phone #: (714)991-0479

Program Name: EXPEDITION HOUSE COUNSELING CENTER Record ID: 300124AP
Legal Name: IMPRESA DEVELOPMENT CORPORATION Service Type: NON

Legal Name: IMPRESA DEVELOPMENT CORPORATION

Address: 1175 NORTH EUCLID STREET

City, State: ANAHEIM, CA 92801
Total Occupancy: 0

Phone #: (714)520-5200

Program Name: EXPEDITION HOUSE RESIDENTIAL TREATMENT PROGRAM Record ID: 300124FP

Legal Name: IMPRESA DEVELOPMENT CORPORATION

Service Type: RES

Address: 1310 WEST PEARL STREET, UNITS A, B, C, AND D

Resident Capacity: 24

City, State: ANAHEIM, CA 92804- Total Occupancy: 24

Phone #: (714)520-5200

Program Name: EXPEDITION HOUSE RESIDENTIAL TREATMENT PROGRAM Record ID: 300124EP

Legal Name: IMPRESA DEVELOPMENT CORPORATION

Address: 1330 WEST PEARL STREET, UNIT A

City, State: ANAHEIM, CA 92804
Total Occupancy: 0

Phone #: (714)520-5200

Program Name: MELODY HOUSE Record ID: 300147AN

Legal Name: INVESTMENTS IN HUMANITY, INC.

Address: 11952 MELODY PARK DRIVE
City, State: GARDEN GROVE, CA 92840
Total Occupancy: 6

Phone #: (714)638-1293

Program Name: SERENITY RECOVERY CENTER Record ID: 300158AN

Legal Name:JOSEPH VANDERHOFFService Type:RESAddress:14511 CARFAX, SUITE CResident Capacity:24City, State:TUSTIN, CA 92780-Total Occupancy:24

Phone #: (714)368-0500

Program Name: K. C. SERVICES Record ID: 300107EN

Legal Name:KOREAN COMMUNITY SERVICES, INC.Service Type:NONAddress:8265 GARDEN GROVE BOULEVARDResident Capacity:0City, State:GARDEN GROVE, CA 92844-Total Occupancy:0

Phone #: (714)539-4544

As of: 04/06/2005 *Orange County*

Program Name: KOREAN COMMUNITY SERVICES Record ID: 300107DN Legal Name: KOREAN COMMUNITY SERVICES, INC. Service Type: NON
Address: 1050 AND 1060 BROOKHURST Resident Capacity: 0
City, State: FULLERTON, CA 92833- Total Occupancy: 0

Phone #: (714)449-1339

Program Name: K. C. SERVICES Record ID: 300107CN Legal Name: KOREAN COMMUNITY SERVICES, INC. Service Type: NON

Address: 14795 JEFFREY ROAD, SUITE 206-A Resident Capacity: 0

City, State: IRVINE, CA 92680- Total Occupancy: 0

Phone #: (949)654-9163

Program Name: LATINO PSYCHOLOGICAL-SOCIAL SERVICES CORPORATION
Legal Name: LATINO PSYCHOLOGICAL - SOCIAL SERVICES CORPORATION
Address: 120 WEST 5TH STREET, SUITE 200
Resident Capacity: 0

City, State: SANTA ANA, CA 92701
Total Occupancy: 0

Phone #: (714)953-8662

Program Name: MARIPOSA WOMEN'S CENTER Record ID: 300005AN Legal Name: MARIPOSA WOMEN'S CENTER, INC. Service Type: NON Address: 812 TOWN AND COUNTRY ROAD Resident Capacity: 0
City, State: ORANGE, CA 92668 Total Occupancy: 0

Phone #: (714)547-6494

Program Name: MATRIX INSTITUTE Record ID: 300132AN

Legal Name:MATRIX INSTITUTE ON ADDICTIONSService Type:NONAddress:275 VICTORIA STREET, SUITE 2LResident Capacity:0City, State:COSTA MESA, CA 92627-Total Occupancy:0

Phone #: (949)631-1510

Program Name: MED PRO TREATMENT CENTERS, INC.
Legal Name: MED PRO TREATMENT CENTERS, INC.
Address: 209 VIA FABRICANTE, SUITE 100
City, State: SAN CLEMENTE, CA 92673Record ID: 300131BP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (949)369-1300

Program Name: MED PRO TREATMENT CENTERS Record ID: 300131AP
Legal Name: MED PRO TREATMENT CENTERS, INC. Service Type: RES-DETOX

Address: 25552 EVANS POINTE Resident Capacity: 6
City, State: DANA POINT, CA 92629Total Occupancy: 6

Phone #: (949)661-6304

Program Name: CHANGES FOR RECOVERY
Legal Name: MUCKER, MILTON
Record ID: 300097BP
Service Type: NON

Address: 300 N. TUSTIN AVENUE, SUITE 201 Resident Capacity: 0
City, State: SANTA ANA, CA 92705- Total Occupancy: 0

Phone #: (714)541-4007

As of: 04/06/2005 *Orange County*

Program Name: THE RECOVERY CENTER
Legal Name: NANCY CLARK AND ASSOCIATES, INC.
Address: 1110 VICTORIA STREET
City, State: COSTA MESA, CA 92627

Record ID: 300067AP
Service Type: RES
Resident Capacity: 38
Total Occupancy: 41

Phone #: (949)646-2340

Program Name: RELAPSE PREVENTION PROGRAM
Legal Name: NANCY CLARK AND ASSOCIATES, INC.
Address: 471 OLD NEWPORT ROAD
City, State: NEWPORT BEACH, CA 92663Total Occupancy: 0

Phone #: (949)631-0550

Program Name: NARCONON SOUTHERN CALIFORNIA, INC. Record ID: 300077AN
Legal Name: NARCONON SOUTHERN CALIFORNIA Service Type: RES-DETOX

Address: 1810 WEST OCEAN FRONT Resident Capacity: 27
City, State: NEWPORT BEACH, CA 92663 Total Occupancy: 27

Phone #: (800)876-6378

Program Name: NATIONAL THERAPEUTIC SERVICES, INC. - THE RAP CENTER
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC. - THE RAP CENTER
Address: 660 WEST BAKER STREET, SUITE 421
City, State: COSTA MESA, CA 92626Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)432-0727

Program Name: NATIONAL THERAPEUTIC SERVICES, INC. - JOSHUA HOUSE
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.
Address: 209 EAST 18TH STREET
City, State: COSTA MESA, CA 92627Record ID: 300159BP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (949)554-0668

Program Name: THE JOSHUA HOUSE Record ID: 300159AP
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC. Service Type: RES
Address: 209 EAST 18TH STREET Resident Capacity: 13
City, State: COSTA MESA, CA 92627- Total Occupancy: 14

Phone #: (714)432-0727

Program Name: NEW DIRECTIONS FOR WOMEN, INC.

Legal Name: NEW DIRECTIONS FOR WOMEN, INC.

Address: 2607 WILLO LANE

City, State: COSTA MESA, CA 92627
Record ID: 300007GN

Service Type: RES

Resident Capacity: 18

Total Occupancy: 18

Phone #: (949)548-5546

Program Name: NEW DIRECTIONS FOR WOMEN/PROGRAM FOR WOMEN WITH CHILI
Legal Name: NEW DIRECTIONS FOR WOMEN, INC.
Record ID: 300007FN
Service Type: RES

Address: 334 UNIVERSITY AVENUE

City, State: COSTA MESA, CA 92627
Total Occupancy: 12

Phone #: (949)548-5546

As of: 04/06/2005 *Orange County*

Program Name: NEW DIRECTIONS FOR WOMEN OUTPATIENT PROGRAM
Legal Name: NEW DIRECTIONS FOR WOMEN, INC.

Record ID: 300007JN
Service Type: NON

Address: 2603 WILLO AVENUE Resident Capacity: 0
City, State: COSTA MESA, CA 92627- Total Occupancy: 0

Phone #: (949)548-5546

Program Name: NEWPORT COAST RECOVERY, L.P. Record ID: 300156AP Legal Name: NEWPORT COAST RECOVERY, L.P. Service Type: RES

Address: 1216 WEST BALBOA BOULEVARD Resident Capacity: 29

City, State: NEWPORT BEACH, CA 92661- Total Occupancy: 29

Phone #: (949)723-3155

Program Name: NEWPORT HARBOR RECOVERY Record ID: 300112BN

Legal Name: NEWPORT HARBOR RECOVERY SERVICES, INC.

Address: 382 HAMILTON STREET, UNITS A & B

City, State: COSTA MESA, CA 92626
Total Occupancy: 15

Phone #: (949)645-5775

Program Name: NEWPORT HARBOR RECOVERY Record ID: 300112DN

Legal Name: NEWPORT HARBOR RECOVERY SERVICES, INC.

Address: 396 HAMILTON STREET, UNIT A

City, State: COSTA MESA, CA 92627
Total Occupancy: 5

Phone #: (949)645-5775

Program Name: NEWPORT HARBOR RECOVERY Record ID: 300112CN

Legal Name:NEWPORT HARBOR RECOVERY SERVICES, INC.Service Type:RESAddress:394 HAMILTON STREET, UNIT AResident Capacity:5City, State:COSTA MESA, CA 92627-Total Occupancy:5

Phone #: (949)645-5775

Program Name: NEWPORT HARBOR RECOVERY Record ID: 300112HN

Legal Name:NEWPORT HARBOR RECOVERY SERVICES, INC.Service Type:RESAddress:396 HAMILTON STREET, UNIT BResident Capacity:5City, State:COSTA MESA, CA 92627-Total Occupancy:5

Phone #: (949)645-5775

Program Name: NEWPORT HARBOR RECOVERY Record ID: 300112GN

Legal Name:NEWPORT HARBOR RECOVERY SERVICES, INC.Service Type:RESAddress:394 HAMILTON STREET, UNIT CResident Capacity:5City, State:COSTA MESA, CA 92627-Total Occupancy:5

Phone #: (949)645-5775

Program Name: NEWPORT HARBOR RECOVERY Record ID: 300112FN

Legal Name:NEWPORT HARBOR RECOVERY SERVICES, INC.Service Type:RESAddress:396 HAMILTON STREET, UNIT CResident Capacity:6City, State:COSTA MESA, CA 92627-Total Occupancy:6

Phone #: (949)645-5775

As of: 04/06/2005 *Orange County*

Program Name: NEWPORT HARBOR RECOVERY Record ID: 300112EN Legal Name: NEWPORT HARBOR RECOVERY SERVICES, INC. Service Type: RES
Address: 394 HAMILTON STREET, UNIT B Resident Capacity: 5
City, State: COSTA MESA, CA 92627- Total Occupancy: 5

Phone #: (949)645-5775

Program Name:OASIS TREATMENT CENTERRecord ID:300025APLegal Name:OASIS TREATMENT CENTER, INC.Service Type:RESAddress:222 WEST BALL ROADResident Capacity:16City, State:ANAHEIM, CA 92805-6046Total Occupancy:22

Phone #: (714)991-4673

Program Name: SOLUTIONS BY THE SEA Record ID: 300144AP
Legal Name: OCEAN RECOVERY L.L.C. Service Type: RES
Address: 1601 WEST BALBOA BOULEVARD
City, State: NEWPORT BEACH, CA 92663- Total Occupancy: 16

Phone #: (949)723-2388

Program Name: OCEAN RECOVERY 1115 Record ID: 300144BP Legal Name: OCEAN RECOVERY L.L.C. Service Type: RES
Address: 1115 WEST BALBOA BOULEVARD Resident Capacity: 22
City, State: NEWPORT BEACH, CA 92661- Total Occupancy: 22

Phone #: (949)723-2388

Program Name: ORANGE COUNTY HALFWAY HOUSE Record ID: 300160AN Legal Name: ORANGE COUNTY HALFWAY HOUSE, INC. Service Type: RES

Address: 12702 JOSEPHINE STREET Resident Capacity: 47

City, State: GARDEN GROVE, CA 92641- Total Occupancy: 47

Phone #: (714)636-8222

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 300117AN Legal Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 300117AN Service Type: NON Address: 655 CAMINO DE LOS MARES, SUITE 120 Resident Capacity: 0 City, State: SAN CLEMENTE, CA 92673- Total Occupancy: 0

Phone #: (949)487-1015

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 300117BN Legal Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVIC Record ID: 300117BN Service Type: NON

Address: 13950 MILTON STREET, SUITE 306 Resident Capacity: 0

City, State: WESTMINSTER, CA 92683- Total Occupancy: 0

Phone #: (714)379-4484

Program Name: PACIFIC HILLS TREATMENT CENTER Record ID: 300074CP
Legal Name: PACIFIC HILLS TREATMENT CENTER, INC. Service Type: RES
Address: 34248 VIA SANTA ROSA, APARTMENTS A, B, AND C
City, State: CAPISTRANO BEACH, CA 92624- Total Occupancy: 14

Phone #: (949)489-8121

As of: 04/06/2005 *Orange County*

Program Name: PACIFIC HILLS TREATMENT CENTERS, INC.
Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.
Address: 27127 CALLE ARROYO, SUITE 1907
City, State: SAN JUAN CAPISTRANO, CA 92675
Record ID: 300074DP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (949)443-1888

Program Name: PACIFIC HILLS TREATMENT CENTERS Record ID: 300074BP
Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.

Address: 217 AND 219 AVENIDA MONTEREY Resident Capacity: 38
City, State: SAN CLEMENTE, CA 92672 Total Occupancy: 38

Phone #: (949)248-5335

Program Name: PAT MOORE FOUNDATION Record ID: 300136BN
Legal Name: PAT MOORE FOUNDATION Service Type: RES-DETOX

Address: 2105 WEST ADAMS STREET Resident Capacity: 6
City, State: SANTA ANA, CA 92704- Total Occupancy: 6

Phone #: (714)546-2200

Program Name: PAT MOORE FOUNDATION Record ID: 300136AN
Legal Name: PAT MOORE FOUNDATION Service Type: RES-DETOX

Address: 1905 WEST HALL AVENUE Resident Capacity: 6
City, State: SANTA ANA, CA 92704- Total Occupancy: 6

Phone #: (714)546-2200

Program Name: PAT MOORE FOUNDATION
Legal Name: PAT MOORE FOUNDATION
Address: 2614 B WEST COLUMBINE
City, State: SANTA ANA, CA 92704Record ID: 300136FN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (714)546-2200

Program Name: PAT MOORE FOUNDATION Record ID: 300136EN Legal Name: PAT MOORE FOUNDATION Service Type: RES

Address: 2614 A WEST COLUMBINE Resident Capacity: 6

City, State: SANTA ANA, CA 92704- Total Occupancy: 6

Phone #: (714)546-2200

Program Name: KARMEN EAP, INTERNATIONAL
Legal Name: PAYNE, KARMEN M.
Address: 660 WEST BAKER, SUITE 219B
City, State: COSTA MESA, CA 92626Record ID: 300126AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)556-5569

Program Name: PHOENIX HOUSE Record ID: 300033AN

Legal Name:PHOENIX HOUSE ORANGE COUNTY, INC.Service Type:RESAddress:1207 EAST FRUIT STREET, BUILDING AResident Capacity:85City, State:SANTA ANA, CA 92701Total Occupancy:85

Phone #: (714)953-9373

Orange County As of: 04/06/2005

Program Name: PHOENIX HOUSE Record ID: 300033BN Legal Name: PHOENIX HOUSE ORANGE COUNTY, INC. Service Type: DSS Resident Capacity: 0 Address: 1207 EAST FRUIT STREET, BUILDINGS C-F Total Occupancy: 0 City, State: SANTA ANA, CA 92701

Phone #: (714)953-9373

Program Name: PHOENIX HOUSE Record ID: 300033CN Legal Name: PHOENIX HOUSE ORANGE COUNTY, INC. Service Type: NON Address: 1207 EAST FRUIT STREET, BUILDING B Resident Capacity: 0 Total Occupancy: 0

City, State: SANTA ANA, CA 92701

Phone #: (714)953-9373

Program Name: CORNERSTONE RECOVERY HOME 18 Record ID: 300017VP Service Type: RES Legal Name: RECOVERY HOMES OF AMERICA, INC. Resident Capacity: 6 Address: 757 SOUTH YORBA STREET City, State: ORANGE, CA 92869-Total Occupancy: 10

Phone #: (714)730-5399

Program Name: CORNERSTONE #19 Record ID: 300017WP

Service Type: RES Legal Name: RECOVERY HOMES OF AMERICA, INC. Address: 3735 EAST SPRING STREET Resident Capacity: 6 Total Occupancy: 10 City, State: ORANGE, CA 92869-

Phone #: (714)730-5399

Record ID: 300017KP Program Name: CORNERSTONE RECOVERY HOME Y-11 Service Type: RES Legal Name: RECOVERY HOMES OF AMERICA, INC. Resident Capacity: 6 Address: 880 YORBA STREET

Total Occupancy: 10

City, State: ORANGE, CA 92869-5052

Phone #: (714)730-5399

Record ID: 300017JP Program Name: CORNERSTONE #9

Service Type: RES Legal Name: RECOVERY HOMES OF AMERICA, INC. Address: 2217 NORTH WRIGHT STREET Resident Capacity: 6 City, State: SANTA ANA, CA 92780 Total Occupancy: 8

Phone #: (714)730-5399

Record ID: 300017IP Program Name: CORNERSTONE RECOVERY HOME #6

Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES Address: 13861 ESPLANADE Resident Capacity: 6 Total Occupancy: 8 City, State: SANTA ANA, CA 92705

Phone #: (714)730-5399

Record ID: 300017HP Program Name: CORNERSTONE #5

Service Type: RES Legal Name: RECOVERY HOMES OF AMERICA, INC. Address: 2641 OLD GRAND Resident Capacity: 6 City, State: SANTA ANA, CA 92701 Total Occupancy: 8

Phone #: (714)730-5399

As of: 04/06/2005 *Orange County*

Program Name: CORNERSTONE #2 Record ID: 300017GP
Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES
Address: 13022 YORBA STREET Resident Capacity: 6
City, State: SANTA ANA, CA 92705 Total Occupancy: 8

Phone #: (714)730-5399

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA OUTPATIENT SERVICE
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 1950 EAST 17TH STREET, SUITE 150
City, State: SANTA ANA, CA 92705Record ID: 300017FP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)547-4300

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA 4 Record ID: 300017DP

Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES-DETOX

Address: 13671 ROSALIND STREET Resident Capacity: 6
City, State: TUSTIN, CA 92780-1831 Total Occupancy: 8

Phone #: (714)730-5399

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA 7 Record ID: 300017CP
Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES-DETOX

Address: 13681 ROSALIND STREET Resident Capacity: 6
City, State: TUSTIN, CA 92780- Total Occupancy: 10

Phone #: (714)730-5399

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA 3 Record ID: 300017BP
Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES
Address: 427 SOUTH YORBA STREET Resident Capacity: 6
City, State: ORANGE, CA 92869- Total Occupancy: 8

Phone #: (714)730-5399

Program Name: CORNERSTONE RECOVERY HOME 17
Legal Name: RECOVERY HOMES OF AMERICA, INC.
Address: 225 SOUTH PROSPECT
City, State: ORANGE, CA 92869Record ID: 300017UP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 10

Phone #: (714)730-5399

Program Name: CORNERSTONE RECOVERY HOME - PROSPECT 1 Record ID: 300017NP Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES

Address: 581 SOUTH PROSPECT Resident Capacity: 6
City, State: ORANGE, CA 92869 Total Occupancy: 8

Phone #: (714)730-5399

Program Name: CORNERSTONE RECOVERY HOME - ALMOND 3-A Record ID: 300017MP Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES

Address: 2605 EAST ALMOND AVENUE, UNIT A Resident Capacity: 6
City, State: ORANGE, CA 92869 Total Occupancy: 7

Phone #: (714)730-5399

Orange County As of: 04/06/2005

Program Name: CORNERSTONE RECOVERY HOME M-10 Record ID: 300017LP Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES Resident Capacity: 6 Address: 3310 MAPLE AVENUE Total Occupancy: 11

Phone #: (714)730-5399

City, State: ORANGE, CA 92869

Program Name: CORNERSTONE 1 Record ID: 300017AP

Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES-DETOX

Resident Capacity: 6 Address: 13682 YORBA STREET Total Occupancy: 10 City, State: TUSTIN, CA 92780-1831

Phone #: (714)730-5399

Program Name: CORNERSTONE RECOVERY HOME #14 Record ID: 300017PP Service Type: RES Legal Name: RECOVERY HOMES OF AMERICA, INC.

Resident Capacity: 6 Address: 1612 EAST FRUIT STREET City, State: SANTA ANA, CA 92701-Total Occupancy: 10

Phone #: (714)730-5399

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA 8 Record ID: 300017OP Service Type: RES-DETOX Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 13672 YORBA STREET Resident Capacity: 6 City, State: TUSTIN, CA 92780-Total Occupancy: 10

Phone #: (714)730-5399

Record ID: 300017TP Program Name: CORNERSTONE RECOVERY HOME 16 Service Type: RES Legal Name: RECOVERY HOMES OF AMERICA, INC.

Resident Capacity: 6 Address: 235 SOUTH PROSPECT Total Occupancy: 10 City, State: ORANGE, CA 92869-Phone #: (714)730-5399

Program Name: CORNERSTONE RECOVERY HOME 15 Record ID: 300017SP Service Type: RES Legal Name: RECOVERY HOMES OF AMERICA, INC. Address: 700 NORTH YORBA STREET Resident Capacity: 6

Total Occupancy: 11

City, State: ORANGE, CA 92869-Phone #: (714)730-5399

Record ID: 300017RP Program Name: CORNERSTONE RECOVERY HOME Legal Name: RECOVERY HOMES OF AMERICA, INC. Service Type: RES

Address: 2721 EAST ALMOND AVENUE, APARTMENT A Resident Capacity: 6 Total Occupancy: 7 City, State: ORANGE, CA 92869-

Phone #: (714)538-9960

Program Name: CORNERSTONE RECOVERY HOME Record ID: 300017QP Service Type: RES Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 2647 EAST ALMOND AVENUE, SUITE A Resident Capacity: 6 City, State: ORANGE, CA 92869-Total Occupancy: 7

Phone #: (714)538-9887

As of: 04/06/2005 *Orange County*

Program Name: ROQUE CENTER Record ID: 300015AN Legal Name: ROQUE CENTER, INC. Service Type: RES

Address: 9842 WEST 13TH STREET Resident Capacity: 80

City, State: GARDEN GROVE, CA 92644 Total Occupancy: 81

Phone #: (714)839-0607

Program Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN
Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN
Address: 240 KNOX STREET
City, State: COSTA MESA, CA 92627Record ID: 300154AP
Service Type: RES
Resident Capacity: 8
Total Occupancy: 8

Phone #: (949)645-1026

Program Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.
Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.
Address: 236 KNOX STREET
City, State: COSTA MESA, CA 92627Record ID: 300154BP
Service Type: RES
Resident Capacity: 8
Total Occupancy: 8

Phone #: (949)645-1026

Program Name: SENTENCING CONCEPTS Record ID: 300079AP Legal Name: SENTENCING CONCEPTS, INC. Service Type: NON Address: 304 WEST CERRITOS AVENUE, BUILDING 7 Resident Capacity: 0 City, State: ANAHEIM, CA 92805 Total Occupancy: 0

Phone #: (714)778-6495

Program Name: JUVENILE ALTERNATIVE SUBSTANCE ABUSE AWARENESS PROGRA Legal Name: SENTENCING CONCEPTS, INC. Service Type: NON
Address: 22772 CENTRE DRIVE, SUITE 160-E Resident Capacity: 0
City, State: LAKE FOREST, CA 92630- Total Occupancy: 0

Phone #: (949)465-0740

Program Name:A.B.L.E. (A BETTER LIVING ENVIRONMENT)Record ID:300085APLegal Name:SHAW, GARY GENEService Type:RESAddress:25151 ARMAGOSA STREETResident Capacity:6City, State:LAGUNA NIGUEL, CA 92677Total Occupancy:6

Phone #: (949)495-2318

Program Name: DAS DRUG DIVERSION PROGRAM
Legal Name: SHOEMAKER, DAVID A.
Address: 615 NORTH BERRY STREET, SUITE J
City, State: BREA, CA 92821Record ID: 300129AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)255-1873

Program Name: SOBER LIVING BY THE SEA Record ID: 300044EP
Legal Name: SOBER LIVING BY THE SEA Service Type: RES
Address: 4711 SEA SHORE Resident Capacity: 6
City, State: NEWPORT BEACH, CA 92663- Total Occupancy: 6

Phone #: (949)673-6696

Orange County As of: 04/06/2005

Program Name: THE VICTORIAN HOUSE Record ID: 300044DP Legal Name: SOBER LIVING BY THE SEA Service Type: RES Address: 505 29TH STREET Resident Capacity: 6

Total Occupancy: 6 City, State: NEWPORT BEACH, CA 92663-

Phone #: (949)673-2423

Program Name: SOBER LIVING BY THE SEA, INC. Record ID: 300044BP Legal Name: SOBER LIVING BY THE SEA, INC. Service Type: RES Resident Capacity: 14 Address: 4500 AND 4504 SEASHORE DRIVE Total Occupancy: 14 City, State: NEWPORT BEACH, CA 92663

Phone #: (949)675-5012

Program Name: SOBER LIVING BY THE SEA Record ID: 300044CP Service Type: RES Legal Name: SOBER LIVING BY THE SEA, INC. Resident Capacity: 11 Address: 4800 SEASHORE DRIVE - UNITS A AND B Total Occupancy: 12

City, State: NEWPORT BEACH, CA 92663

Phone #: (949)673-6696

Program Name: TOUCHSTONES Record ID: 300070AN

Service Type: RES Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC. Address: 525 NORTH PARKER Resident Capacity: 0 Total Occupancy: 0 City, State: ORANGE, CA 92868-

Phone #: (714)639-5542

Record ID: 300143CP Program Name: SOLUTIONS FOR RECOVERY Service Type: RES Legal Name: SOLUTIONS FOR RECOVERY Resident Capacity: 6 Address: 34121 MOONGATE COURT Total Occupancy: 7 City, State: DANA POINT, CA 92629-

Phone #: (949)248-1481

Record ID: 300143BP Program Name: SOLUTIONS FOR RECOVERY Legal Name: SOLUTIONS FOR RECOVERY, INC. Service Type: RES-DETOX

Address: 31931 PASEO TERRAZA Resident Capacity: 6 City, State: SAN JUAN CAPISTRANO, CA 92675-Total Occupancy: 8

Phone #: (949)661-8313

Record ID: 300143DP Program Name: SOLUTIONS FOR RECOVERY Legal Name: SOLUTIONS FOR RECOVERY, INC. Service Type: NON Address: 1231 PUERTA DEL SOL, SUITE 100 Resident Capacity: 0 Total Occupancy: 0 City, State: SAN CELEMENTE, CA 92673-

Phone #: (949)429-7883

Record ID: 300012BN Program Name: SOUTH COAST COUNSELING Service Type: RES

Legal Name: SOUTH COAST COUNSELING, INC. Address: 693 PLUMER STREET Resident Capacity: 16 City, State: COSTA MESA, CA 92627-2720 Total Occupancy: 16

Phone #: (949)642-0180

As of: 04/06/2005 *Orange County*

Program Name: HERITAGE HOUSE Record ID: 300054AN Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES

Address: 2212-A PLACENTIA AVENUE Resident Capacity: 1
City, State: COSTA MESA, CA 92627 Total Occupancy: 3

Phone #: (949)646-2271

Program Name: HERITAGE HOUSE III Record ID: 300054CN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES Address: 2212-D PLACENTIA AVENUE Resident Capacity: 3 City, State: COSTA MESA, CA 92627 Total Occupancy: 6

Phone #: (949)646-2271

Program Name: HERITAGE HOUSE V Record ID: 300054EN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES
Address: 2218-C PLACENTIA AVENUE Resident Capacity: 3
City, State: COSTA MESA, CA 92627 Total Occupancy: 6

Phone #: (949)646-2271

Program Name: HERITAGE HOUSE CENTERS Record ID: 300054JN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: NON Address: 7340 CENTER AVENUE Resident Capacity: 0
City, State: HUNTINGTON BEACH, CA 92647- Total Occupancy: 0

Phone #: (714)799-7766

Program Name: HERITAGE HOUSE NORTH Record ID: 300054IN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES
Address: 315, 319, AND 321 NORTH STATE COLLEGE BOULEVARD Resident Capacity: 21
City, State: ANAHEIM, CA 92806-2925 Total Occupancy: 44

Phone #: (562)923-4545

Program Name: HERITAGE HOUSE Record ID: 300054HN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES
Address: 2212-C PLACENTIA AVENUE Resident Capacity: 3
City, State: COSTA MESA, CA 92627 Total Occupancy: 6

Phone #: (949)646-2271

Program Name: HERITAGE HOUSE IV Record ID: 300054DN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES
Address: 2218-B PLACENTIA AVENUE Resident Capacity: 3
City, State: COSTA MESA, CA 92627 Total Occupancy: 6

Phone #: (949)646-2271

Program Name: HERITAGE HOUSE II Record ID: 300054BN

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Service Type: RES
Address: 2212-B PLACENTIA AVENUE Resident Capacity: 3
City, State: COSTA MESA, CA 92627 Total Occupancy: 6

Phone #: (949)646-2271

As of: 04/06/2005 *Orange County*

Program Name: HERITAGE HOUSE VILLAGE Record ID: 300054KN Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INCORP Service Type: RES Address: 405 SOUTH ROSE STREET Resident Capacity: 17 Total Occupancy: 45 City, State: ANAHEIM, CA 92805-Phone #: (562)923-4545 Program Name: SPENCER RECOVERY CENTERS, INC. Record ID: 300088HP Legal Name: SPENCER RECOVERY CENTERS, INC. Service Type: NON Address: 2020 SOUTH COAST HIGHWAY Resident Capacity: 0 Total Occupancy: 0 City, State: LAGUNA BEACH, CA 92651-Phone #: (949)376-3705 Program Name: SPENCER RECOVERY CENTERS Record ID: 300088BP Service Type: NON Legal Name: SPENCER RECOVERY CENTERS, INC. Resident Capacity: 0 Address: 1316 SOUTH COAST HIGHWAY City, State: LAGUNA BEACH, CA 92651-Total Occupancy: 0 Phone #: (949)376-3705 Program Name: SPENCER RECOVERY CENTERS Record ID: 300088CP Service Type: RES Legal Name: SPENCER RECOVERY CENTERS, INC. Address: 1285 OCEANFRONT Resident Capacity: 4 Total Occupancy: 4 City, State: LAGUNA BEACH, CA 92651-Phone #: (949)376-3705 Record ID: 300088KP Program Name: SPENCER RECOVERY CENTERS, INC. Service Type: RES Legal Name: SPENCER RECOVERY CENTERS, INC. Resident Capacity: 3 Address: 1337 C GAVIOTA Total Occupancy: 3 City, State: LAGUNA BEACH, CA 92651-Phone #: (949)376-3705 Program Name: SPENCER RECOVERY CENTERS Record ID: 300088IP Service Type: RES Legal Name: SPENCER RECOVERY CENTERS, INC. Address: 1337 A GAVIOTA Resident Capacity: 3 City, State: LAGUNA BEACH, CA 92651-Total Occupancy: 3 Phone #: (949)376-3705 Record ID: 300088FP Program Name: SPENCER RECOVERY CENTERS, INC. Legal Name: SPENCER RECOVERY CENTERS, INC. Service Type: RES Address: 2020 SOUTH COAST HIGHWAY, ROOMS 114, 115, 116 Resident Capacity: 6 Total Occupancy: 6 City, State: LAGUNA BEACH, CA 92651-

Program Name:SPENCER RECOVERY CENTERS, INC,
Legal Name:Record ID:300088JPAddress:SPENCER RECOVERY CENTERS, INC.Service Type:RESAddress:1337 B GAVIOTAResident Capacity:3City, State:LAGUNA BEACH, CA 92651-Total Occupancy:3

Phone #: (949)376-3705

Phone #: (949)376-3705

As of: 04/06/2005 *Orange County*

Program Name:SPENCER RECOVERY CENTERSRecord ID:300088GPLegal Name:SPENCER RECOVERY CENTERS, INC.Service Type:RESAddress:1337 GAVIOTAResident Capacity:6

City, State: LAGUNA BEACH, CA 92651
Total Occupancy: 6

Phone #: (949)376-3705

Program Name:SPENCER RECOVERY CENTERSRecord ID: 300088DPLegal Name:SPENCER RECOVERY CENTERS, INC.Service Type: RESAddress:1283 OCEANFRONTResident Capacity: 5

City, State: LAGUNA BEACH, CA 92651- Total Occupancy: 5

Phone #: (949)376-3705

Program Name: SPENCER RECOVERY CENTER Record ID: 300088AP
Legal Name: SPENCER RECOVERY CENTERS, INC. Service Type: RES-DETOX

Address: 1316 SOUTH COAST HIGHWAY Resident Capacity: 28 City, State: LAGUNA BEACH, CA 92651 Total Occupancy: 28

Phone #: (949)376-3705

Program Name: GERRY HOUSE Record ID: 300040AN

Legal Name:STRAIGHT TALK CLINIC, INCORPORATEDService Type:RESAddress:1225-1227 WEST 6TH STREETResident Capacity:12City, State:SANTA ANA, CA 92703Total Occupancy:12

Phone #: (714)972-1402

Program Name:SUPPORTIVE RECOVERY SERVICESRecord ID:300157APLegal Name:SUPPORTIVE RECOVERY SERVICESService Type:RESAddress:160 BAY STREETResident Capacity:6City, State:COSTA MESA, CA 92627-Total Occupancy:8

Phone #: (949)515-9915

Program Name: THE GARY CENTER Record ID: 300093AN Legal Name: THE GARY CENTER Service Type: DHS

Address: 341 HILLCREST STREET Resident Capacity: 0

City, State: LA HABRA, CA 90631- Total Occupancy: 0

Phone #: (562)691-3263

Program Name: MAINSTREAM GROUP Record ID: 300084BN

Legal Name:THE MAINSTREAM GROUP INC.Service Type:RESAddress:26882 AVENIDA LAS PALMASResident Capacity:6City, State:CAPISTRANO BEACH, CA 92624-Total Occupancy:6

Phone #: (949)366-9210

Program Name: MAINSTREAM GROUP Record ID: 300084HN

Legal Name: THE MAINSTREAM GROUP INC.

Address: 3901 CALLE MAYO

City, State: SAN CLEMENTE, CA 92673
Total Occupancy: 6

Phone #: (949)498-5706

As of: 04/06/2005 *Orange County*

Program Name:	MAINSTREAM GROUP	Record ID:	300084EN
-	THE MAINSTREAM GROUP INC.	Service Type:	RES
Address:	34536 CALLE PORTOLA	Resident Capacity:	6
City, State:	CAPISTRANO BEACH, CA 92624-	Total Occupancy:	6
Phone #:	(949)366-9210		
Program Name:	MAINSTREAM GROUP	Record ID:	300084GN
Legal Name:	THE MAINSTREAM GROUP INC.	Service Type:	NON
Address:	101 AVENIDA SERRA	Resident Capacity:	0
City, State:	SAN CLEMENTE, CA 92672-	Total Occupancy:	0
Phone #:	(949)366-9210		
Program Name:	MAINSTREAM GROUP	Record ID:	300084FN
Legal Name:	THE MAINSTREAM GROUP INC.	Service Type:	RES
Address:	34457 CAMINO EL MOLINO	Resident Capacity:	6
City, State:	CAPISTRANO BEACH, CA 92624-	Total Occupancy:	6
Phone #:	(949)366-9210		
Program Name:	THE MAINSTREAM GROUP	Record ID:	
Legal Name:	THE MAINSTREAM GROUP, INC.	Service Type:	RES
Address:	26920 CALLE DOLORES, UNIT A	Resident Capacity:	6
City, State:	CAPISTRANO BEACH, CA 92624-	Total Occupancy:	6
Phone #:	(949)366-9210		
-	THE MAINSTREAM GROUP, INC.	Record ID:	
•	THE MAINSTREAM GROUP, INC.	Service Type:	
	26920 CALLE DELORES, UNIT B	Resident Capacity:	
•	CAPISTRANO BEACH, CA 92624-	Total Occupancy:	6
Phone #:	(949)366-9210		
	THE MAINSTREAM GROUP, INC.	Record ID:	
_	THE MAINSTREAM GROUP, INC.	Service Type:	
	26884 AVENIDA LAS PALMAS	Resident Capacity:	
•	CAPISTRANO BEACH, CA 92624-	Total Occupancy:	8
Phone #:	(949)366-9210		
-	THE NEW BEGINNING	Record ID:	
•	THE NEW BEGINNING FELLOWSHIP CENTER	Service Type:	
	2024 EAST SYCAMORE AVENUE	Resident Capacity:	
	ORANGE, CA 92867-	Total Occupancy:	6
Phone #:	(714)839-5305		
-	NEW BEGINNING FELLOWSHIP CENTER	Record ID:	
=	THE NEW BEGINNING FELLOWSHIP CENTER	Service Type:	
	16581 BROOKHURST	Resident Capacity:	0
1 1-4 114-4	LANCERINE VALLEV VA 02706	Total ()again an ann	/ \

Total Occupancy: 0

Phone #: (714)839-2515

City, State: FOUNTAIN VALLEY, CA 92706-

As of: 04/06/2005 *Orange County*

Program Name:THE VILLARecord ID:300016ANLegal Name:THE VILLA CENTER, INC.Service Type:RESAddress:910 NORTH FRENCH STREETResident Capacity:15City, State:SANTA ANA, CA 92701Total Occupancy:15

Phone #: (714)547-1249

Program Name: THE VILLA ANNEX
Legal Name: THE VILLA CENTER, INC.
Address: 311 EAST WASHINGTON STREET
City, State: SANTA ANA, CA 92701
Record ID: 300016CN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (714)547-1249

Program Name: THE VILLA ANNEX II Record ID: 300016DN Legal Name: THE VILLA CENTER, INC. Service Type: RES

Address: 519 EAST WASHINGTON Resident Capacity: 6

City, State: SANTA ANA, CA 92701- Total Occupancy: 6

Phone #: (714)547-3301

Program Name: THOMAS P. ALLEN
Legal Name: THOMAS P. ALLEN
Address: 1120 WARNER AVENUE, SUITE D2
City, State: SANTA ANA, CA 92704Record ID: 300151AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)546-2200

Program Name: TWIN TOWN TREATMENT CENTERS - LOS ALAMITOS
Legal Name: TWIN TOWN CORPORATION
Address: 5122 EAST KATELLA AVENUE, SUITE 102
City, State: LOS ALAMITOS, CA 90720Total Occupancy: 0

Phone #: (562)594-8844

Program Name: TWIN TOWN TREATMENT CENTERS
Legal Name: TWIN TOWN CORPORATION
Address: 4388 EAST KATELLA BOULEVARD
City, State: LOS ALAMITOS, CA 90720Record ID: 300128BP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (562)596-0050

Program Name: TWIN TOWN TREATMENT CENTERS, ORANGE Record ID: 300128CP Legal Name: TWIN TOWN CORPORATION Service Type: NON
Address: 705 WEST LA VETA AVENUE, SUITE 208 Resident Capacity: 0
City, State: ORANGE, CA 92868- Total Occupancy: 0

Phone #: (714)771-8193

Program Name: SOUTH COAST COUNSELING AND PSYCHOLOGICAL SERVICES Record ID: 300162AP

Legal Name:WEL-MOR PSYCHOLOGY GROUP, INC.Service Type:NONAddress:2900 BRISTOL STREET, SUITE E 103Resident Capacity:0City, State:COSTA MESA, CA 92626-Total Occupancy:0

Phone #: (714)540-9070

Orange County As of: 04/06/2005

Program Name: SOUTH COAST COUNSELING AND PSYCHOLOGICAL SERVICES Record ID: 300162BP Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC. Service Type: NON

Resident Capacity: 0 Address: 5130 EAST LA PALMA, SUITE 212 Total Occupancy: 0 City, State: ANAHEIM, CA 92807-

Phone #: (714)540-9070

Program Name: SOUTH COAST COUNSELING AND PSYCHOLOGICAL SERVICES Record ID: 300162CP

Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC. Service Type: NON Address: 26041 CAPE DRIVE, SUITE 129 Resident Capacity: 0

Total Occupancy: 0 City, State: LAGUNA NIGEL, CA 92677-

Phone #: (714)540-9070

Program Name: BILL MARTIN PH.D Record ID: 300135AP

Legal Name: WILLIAM W. MARTIN, PH.D Service Type: NON Resident Capacity: 0 Address: 675 CAMINO DE LOS MARES, SUITE 302 City, State: SAN CLEMENTE, CA 92673-Total Occupancy: 0

Phone #: (949)248-7377

Program Name: WOODGLEN RECOVERY JUNCTION Record ID: 300042BN Service Type: RES-DETOX Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED

Address: 751 WEST ORANGETHORPE AVENUE Resident Capacity: 6

Total Occupancy: 6 City, State: FULLERTON, CA 92832-

Phone #: (714)879-2741

Record ID: 300042AN Program Name: WOODGLEN RECOVERY JUNCTION

Service Type: RES Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED Resident Capacity: 24 Address: 771 WEST ORANGETHORPE AVENUE City, State: FULLERTON, CA 92832-Total Occupancy: 25

Phone #: (714)879-6916

Record ID: 300042CN Program Name: DAYLIGHT AGAIN

Service Type: RES Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED Address: 329 EAST COMMONWEALTH AVENUE Resident Capacity: 16 Total Occupancy: 16 City, State: FULLERTON, CA 92832-

Phone #: (714)870-4057

Record ID: 300121AN Program Name: WOMEN'S RECOVERY OF CALIFORNIA, "YELLOWSTONE WEST"

Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC. Service Type: RES Address: 3132 BOSTON WAY Resident Capacity: 15 Total Occupancy: 15 City, State: COSTA MESA, CA 92626-

Phone #: (714)966-9872

Program Name: YELLOWSTONE (WOMEN'S RECOVERY OF CALIFORNIA) Record ID: 300121BN

Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC. Service Type: RES-DETOX

Address: 154 EAST BAY Resident Capacity: 6

City, State: COSTA MESA, CA 92627-2147 Total Occupancy: 7

Phone #: (888)941-9048

As of: 04/06/2005

Program Name: WOMEN'S RECOVERY OF CALIFORNIA - YELLOWSTONE EAST

Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.

Address: 959 PAULARINO

City, State: COSTA MESA, CA 92627-

Phone #: (949)646-4494

Record ID: 300121CN Service Type: RES

Resident Capacity: 6

Total Occupancy: 8

As of: 04/06/2005 *Placer County*

Program Name: CHAPA-DE INDIAN HEALTH PROGRAM, INC.
Legal Name: CHAPA-DE INDIAN HEALTH PROGRAM, INC.
Address: 11670 ATWOOD ROAD
City, State: AUBURN, CA 95603Record ID: 310014AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (530)887-2828

Program Name: HOPE HELP AND HEALING
Legal Name: HOPE HELP AND HEALING
Address: 11960 HERITAGE OAKS PLACE, SUITE S-20
City, State: AUBURN, CA 95603Resident Capacity: 0
Total Occupancy: 0

Phone #: (530)885-4249

Program Name: ABBA HOUSE Record ID: 310010AN Legal Name: HOPE HELP AND HEALING Service Type: RES

Address: 3875 CEDAR MIST LANE Resident Capacity: 6
City, State: AUBURN, CA 95603- Total Occupancy: 7

Phone #: (530)887-5445

Program Name: TRUE STEP Record ID: 310010DN
Legal Name: HOPE HELP AND HEALING Service Type: RES

Address: 4255 MEADOW GLEN ROAD Resident Capacity: 6
City, State: AUBURN, CA 95603- Total Occupancy: 6

Phone #: (530)885-4249

Program Name: NEW LEAF COUNSELING SERVICES Record ID: 310007AP Legal Name: JAMES HARDWICK Service Type: NON
Address: 1254 HIGH STREET Resident Capacity: 0
City, State: AUBURN, CA 95603 Total Occupancy: 0

Phone #: (530)889-9195

Program Name: NEW LEAF WOMEN AND WOMEN WITH CHILDREN - MEADOWVIEW Record ID: 310007BP Legal Name: JAMES HARDWICK Service Type: RES

Address: 5055 MEADOWVIEW LANE Resident Capacity: 6

City, State: AUBURN, CA 95603- Total Occupancy: 6

Phone #: (530)889-9195

Program Name: NEW LEAF COUNSELING RESIDENTIAL/HOFFMAN Record ID: 310007CP Legal Name: JAMES N. HARDWICK Service Type: RES

Address: 199 HOFFMAN AVENUE Resident Capacity: 0
City, State: AUBURN, CA 95603- Total Occupancy: 0

Phone #: (530)885-9067

Program Name: KOINONIA GROUP HOME #4 Record ID: 310012DN

Legal Name:KOINONIA FOSTER HOMES, INC.Service Type:**Address:8200 KING ROADResident Capacity:0City, State:LOOMIS, CA 95650-Total Occupancy:0

Phone #: (916)652-0171

As of: 04/06/2005 *Placer County*

Program Name: KOINONIA GROUP HOME #3 Record ID: 310012CN

Legal Name:KOINONIA FOSTER HOMES, INC.Service Type: **Address:5440 PARAGON STREETResident Capacity: 0City, State:ROCKLIN, CA 95677-Total Occupancy: 0

Phone #: (916)652-0171

Program Name: KOINONIA GROUP HOME #1 Record ID: 310012AN

Legal Name:KOINONIA FOSTER HOMES, INC.Service Type: **Address:3880 OAK TREE LANEResident Capacity: 0City, State:LOOMIS, CA 95650-Total Occupancy: 0

Phone #: (916)652-0171

Program Name: KOINONIA GROUP HOME #2 Record ID: 310012BN

Legal Name:KOINONIA FOSTER HOMES, INC.Service Type: **Address:6331 KING ROADResident Capacity: 0City, State:LOOMIS, CA 95650-Total Occupancy: 0

Phone #: (916)652-0171

Program Name: PLACER COUNTY ALCOHOL AND OR OTHER DRUG TREATMENT PR(Record ID: 310013BN

Legal Name: PLACER COUNTY ALCOHOL AND OR OTHER DRUG TREATMENT PR(Service Type: NON

Address: 11512 B AVENUE Resident Capacity: 0
City, State: AUBURN, CA 95603- Total Occupancy: 0

Phone #: (530)889-7291

Program Name: PROGRESS HOUSE WOMEN AND CHILDREN'S FACILITY Record ID: 310005BN

Legal Name:PROGRESS HOUSE, INC.Service Type:RESAddress:34248 EAST TOWLE ROADResident Capacity:10City, State:ALTA, CA 95701-Total Occupancy:12

Phone #: (530)626-9240

Program Name: ROCKLIN COMMUNITY COUNSELING CENTER Record ID: 310009DN Legal Name: ROCKLIN COMMUNITY COUNSELING CENTER, INC.

Service Type: NON

Address: 4230 ROCKLIN ROAD, SUITE 1-A Resident Capacity: 0
City, State: ROCKLIN, CA 95677- Total Occupancy: 0

Phone #: (916)315-0468

Program Name: RCCC - APPLEGATE MEN'S RESIDENTIAL CENTER
Legal Name: ROCKLIN COMMUNITY COUNSELING SERVICES, INC.
Address: 17891 LAKE ARTHUR ROAD
City, State: APPLEGATE, CA 95703Resident Capacity: 6
Total Occupancy: 10

Phone #: (916)315-0468

Program Name: SOUTH PLACER RESIDENTIAL TREATMENT PROGRAM

Legal Name: SIERRA COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE

Record ID: 310001BN

Service Type: RES-DETOX

Address: 11417 D AVENUE Resident Capacity: 32 City, State: AUBURN, CA 95603 Total Occupancy: 32

Phone #: (530)885-1917

As of: 04/06/2005 *Placer County*

Program Name: SIERRA COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - LINC

Legal Name: SIERRA COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE

Record ID: 310001CN

Service Type: NON

Address: 1530 3RD STREET, SUITE 202 Resident Capacity: 0
City, State: LINCOLN, CA 95648- Total Occupancy: 0

Phone #: (916)652-5831

Program Name: SIERRA FAMILY SERVICES Record ID: 310003AN

Legal Name: SIERRA FAMILY SERVICES, INCORPORATED

Address: 333 SUNRISE AVENUE, SUITE 701

City, State: ROSEVILLE, CA 95661-3482

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (916)783-5207

Program Name: SIERRA FAMILY SERVICES Record ID: 310003CN

Legal Name: SIERRA FAMILY SERVICES, INCORPORATED

Address: 2690 LAKE FOREST ROAD, SUITE 202

City, State: TAHOE CITY, CA 96145
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (530)581-4054

Program Name: SIERRA FAMILY SERVICES Record ID: 310003BN

Legal Name: SIERRA FAMILY SERVICES, INCORPORATED

Address: 991 LINCOLN WAY

City, State: AUBURN, CA 95603

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (530)885-0441

Program Name: EAGLE RECOVERY PROGRAMS Record ID: 310004DN

Legal Name: THE SUBSTANCE ABUSE GROWTH AND RECOVERY INSTITUTE

Address: 12183 LOCKSLEY LANE AND 12174, 12176 & 12178 SHALE RIDGE
City, State: AUBURN, CA 95602
Total Occupancy: 58

Phone #: (530)823-0777

Program Name: EAGLE RECOVERY OUTPATIENT PROGRAM Record ID: 310004EN

Legal Name: THE SUBSTANCE ABUSE GROWTH AND RECOVERY INSTITUTE

Service Type: NON

A labeled 12182 LOCKEL FYLANE

Address: 12183 LOCKSLEY LANE Resident Capacity: 0
City, State: AUBURN, CA 95602- Total Occupancy: 0

Phone #: (530)823-0777

As of: 04/06/2005

Program Name: PLUMAS COUNTY ALCOHOL AND DRUG PROGRAM

Legal Name: PLUMAS COUNTY
Address: 711 EAST MAIN STREET
City, State: QUINCY, CA 95971-

Phone #: (530)283-6316

Record ID: 320001BN Service Type: NON Resident Capacity: 0 Total Occupancy: 0

As of: 04/06/2005 Riverside County

Program Name: 10 ACRE RANCH Record ID: 330042AN
Legal Name: 10 ACRE RANCH, INC. Service Type: RES-DETOX

Address: 6067 BEACH STREET Resident Capacity: 9
City, State: RIVERSIDE, CA 92509- Total Occupancy: 10

Phone #: (909)681-8096

Program Name: A & D HEALTH MANAGEMENT OF SOUTHERN CALIFORNIA Record ID: 330049AP
Legal Name: A & D HEALTH MANAGEMENT SYSTEMS OF SOUTHERN CALIFORNI Service Type: NON
Address: 3559 WEST RAMSEY, SUITE D-5 Resident Capacity: 0

City, State: BANNING, CA 92220- Total Occupancy: 0

Phone #: (909)849-1494

Program Name: ABC RECOVERY CENTERS Record ID: 330001AN
Legal Name: A.B.C. RECOVERY CENTER, INC. Service Type: RES-DETOX

Address: 44-404, 44-374 PALM STREET and 44-435 BISKRA STREET

City, State: INDIO, CA 92201

Resident Capacity: 86

Total Occupancy: 89

Phone #: (760)342-6616

Program Name: THE AWARENESS PROGRAM
Legal Name: AWARENESS PROGRAM, INC.
Address: 1700 EAST TAHQUITZ, SUITE 6
City, State: PALM SPRINGS, CA 92262-7158
Record ID: 330051CP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)322-4554

Program Name:THE AWARENESS PROGRAM
Legal Name:Record ID:330051APAddress:AWARENESS PROGRAM, INC.Service Type:NONAddress:45-550 GRACE STREETResident Capacity:0City, State:INDIO, CA 92201-Total Occupancy:0

Phone #: (760)342-1233

Program Name: AXIOM COUNSELING TEAM
Legal Name: AXIOM COUNSELING TEAM
Address: 6887 MAGNOLIA AVENUE
City, State: RIVERSIDE, CA 92506
Record ID: 330069AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)369-5260

Program Name: CALIFORNIA RECOVERY CLINICS
Legal Name: CALIFORNIA RECOVERY CLINICS
Address: 1101 SOUTH MAIN STREET AND 710 SOUTH RIMPAU, SUITE 102
City, State: CORONA, CA 92882Record ID: 330061AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)549-8888

Program Name: CHAPMAN HOUSE, INC.

Legal Name: CHAPMAN HOUSE, INC.

Address: 3894 4TH STREET

City, State: RIVERSIDE, CA 92501
Record ID: 330055BP

Service Type: RES

Resident Capacity: 6

Total Occupancy: 8

Phone #: (909)276-1369

As of: 04/06/2005 *Riverside County*

Program Name: CHAPMAN HOUSE, INC.
Legal Name: CHAPMAN HOUSE, INC.
Address: 3293 LOCUST STREET
City, State: RIVERSIDE, CA 92501Record ID: 330055CP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8

Phone #: (714)612-7600

Program Name: CHAPMAN HOUSE, INC.
Legal Name: CHAPMAN HOUSE, INC.
Address: 24490 SUNNYMEAD BOULEVARD, SUITE 102
City, State: MORENO VALLEY, CA 92553Record ID: 330055AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (714)288-9779

Program Name: HILL ALCOHOL & DRUG TREATMENT Record ID: 330032BP
Legal Name: COMMUNITY SOLUTIONS, INC. Service Type: NON
Address: 44099 MARGARITA ROAD Resident Capacity: 0
City, State: TEMECULA, CA 92592- Total Occupancy: 0

Phone #: (909)303-1230

Program Name: BREAKING FREE/VILLAGE COUNSELING Record ID: 330052BP Legal Name: DR. JERRY MEINTS COUNSELING, INC., A PROFESSIONAL CORPORA' Service Type: NON Address: 13560 PALM DRIVE Resident Capacity: 0
City, State: DESERT HOT SPRINGS, CA 92240- Total Occupancy: 0

Phone #: (760)288-3123

Program Name: BREAKING FREE/VILLAGE COUNSELING Record ID: 330052AP Legal Name: DR. JERRY MEINTS FAMILY COUNSELING, INC. Service Type: NON Address: 73302 HIGHWAY 111 Resident Capacity: 0
City, State: PALM DESERT, CA 92260- Total Occupancy: 0

Phone #: (760)773-0669

Program Name: SUN RAY ADDICTIONS COUNSELING & EDUCATION
Legal Name: HUGHES, EUGENE A.
Address: 980 NORTH STATE STREET, SUITE 2
City, State: HEMET, CA 92543Record ID: 330045AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)652-3560

Program Name: I AM NEW LIFE RANCH
Legal Name: I AM NEW LIFE MINISTRIES, INC.
Address: 38400 SAN IGNACIO ROAD
City, State: HEMET, CA 92543
Record ID: 330024AN
Service Type: RES
Resident Capacity: 8
Total Occupancy: 8

Phone #: (909)767-2575

Program Name:ARLINGTON HOUSERecord ID:330047ANLegal Name:INLAND AIDS PROJECTService Type:RESAddress:5950 ARLINGTON AVENUEResident Capacity:6City, State:RIVERSIDE, CA 92506-Total Occupancy:6

Phone #: (909)637-9112

As of: 04/06/2005 Riverside County

Program Name: ABUNDANT GRACE ADULT RESIDENTIAL FACILITY
Legal Name: JOSHUA SOCIAL SERVICES, INC.
Address: 4175 BROCKTON AVENUE
City, State: RIVERSIDE, CA 92503Record ID: 330062BN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (909)782-9565

Program Name: LA VISTA ALCOHOL & DRUG RECOVERY CENTER Record ID: 330002AN
Legal Name: LA VISTA

Record ID: 330002AN
Service Type: RES-DETOX

Address: 2220 GIRARD STREET Resident Capacity: 28
City, State: SAN JACINTO, CA 92583
Total Occupancy: 33

Phone #: (909)925-8450

Program Name: LA VISTA ALCOHOL/DRUG RECOVERY CENTER (OUR MOTHER'S HO Record ID: 330002BN

Legal Name: LA VISTA Service Type: RES
Address: 294 MIDWAY STREET Resident Capacity: 6
City, State: SAN JACINTO, CA 92583- Total Occupancy: 6

Phone #: (909)925-8450

Program Name: LIFE'S JOURNEY Record ID: 330040AP
Legal Name: LIFE'S JOURNEY CENTER, INC. Service Type: RES-DETOX

Address: 291 EAST CAMINO MONTE VISTA Resident Capacity: 30 City, State: PALM SPRINGS, CA 92262 Total Occupancy: 30

Phone #: (760)864-6363

Program Name: LIFE'S JOURNEY CENTER Record ID: 330040BP
Legal Name: LIFE'S JOURNEY CENTER, INC. Service Type: NON
Address: 291 EAST CAMINO MONTE VISTA Resident Capacity: 0
City, State: PALM SPRINGS, CA 92262- Total Occupancy: 0

Phone #: (760)864-6363

Program Name: MFI RECOVERY CENTER-WOODCREST Record ID: 330013AN
Legal Name: MFI RECOVERY CENTER Service Type: RES-DETOX

Address: 17270 ROOSEVELT STREET Resident Capacity: 56
City, State: RIVERSIDE, CA 92508 Total Occupancy: 56

Phone #: (909)780-2541

Program Name: MFI RECOVERY CENTER-HASKELL HOUSE Record ID: 330013FN
Legal Name: MFI RECOVERY CENTER Service Type: RES

Address: 8804 HASKELL STREET Resident Capacity: 6
City, State: RIVERSIDE, CA 92503 Total Occupancy: 6

Phone #: (909)683-6596

Program Name: MFI RECOVERY CENTER - JURUPA HOUSE Record ID: 330013HN
Legal Name: MFI RECOVERY CENTER Service Type: RES

Address: 6133 KARIANNE LANE Resident Capacity: 6

City, State: RIVERSIDE, CA 92501- Total Occupancy: 6

Phone #: (909)683-6596

As of: 04/06/2005 Riverside County

Program Name: MFI RECOVERY CENTER Record ID: 330013IN Legal Name: MFI RECOVERY CENTER Service Type: NON
Address: 5870 ARLINGTON AVENUE Resident Capacity: 0
City, State: RIVERSIDE, CA 92504- Total Occupancy: 0

Phone #: (951)683-6596

Program Name: MFI RECOVERY CENTER Record ID: 330013JN Legal Name: MFI RECOVERY CENTER Service Type: NON Address: 2781 W. RAMSEY STREET, SUITES 1, 2, & 3 Resident Capacity: 0

Address: 2781 W. RAMSEY STREET, SUITES 1, 2, & 3 Resident Capacity: 0
City, State: BANNING, CA 92220- Total Occupancy: 0

Phone #: (909)849-3896

Program Name: A WOMAN'S PLACE Record ID: 330013GN
Legal Name: MFI RECOVERY CENTER Service Type: RES

Address: 4295 BROCKTON AVENUE Resident Capacity: 38

City, State: RIVERSIDE, CA 92501 Total Occupancy: 64

Phone #: (909)683-6596

Program Name: MICHAEL'S HOUSE Record ID: 330014AN

Legal Name: MICHAEL ALAN ROSEN FOUNDATION Service Type: RES-DETOX

Address: 430 SOUTH CAHUILLA ROAD Resident Capacity: 24
City, State: PALM SPRINGS, CA 92262 Total Occupancy: 24

Phone #: (760)320-5486

Program Name: SUNRISE RECOVERY RANCH
Legal Name: MOSEN, CARL MITCHELL
Record ID: 330056AP
Service Type: RES-DETOX

Address: 6690 LIMONITE FRONTAGE ROAD Resident Capacity: 13
City, State: RIVERSIDE, CA 92509- Total Occupancy: 13

Phone #: (909)328-0146

Program Name: PALM SPRINGS SERENITY RETREAT Record ID: 330068AP

Legal Name: PALM SPRINGS SERENITY RETREAT\DONALD R. WARD

Address: 2095 NORTH INDIAN CANYON DRIVE

City, State: PALM SPRINGS, CA 92262
Total Occupancy: 24

Phone #: (760)416-7951

Program Name: PERRIS VALLEY RECOVERY PROGRAMS, INC.

Legal Name: PERRIS VALLEY RECOVERY PROGRAMS, INC.

Address: 236 EAST THIRD STREET, SUITE B

Resident Capacity: 0

Total Occupancy: 0

City, State: PERRIS, CA 92570

Phone #: (909)657-2960

Program Name: PHOENIX SKILLS CENTER POWER PROGRAM Record ID: 330066AN

Legal Name:PHOENIX PROGRAMS, INC.Service Type:NONAddress:1215 SOUTH BUENA VISTAResident Capacity:0City, State:SAN JACINTO, CA 94708-Total Occupancy:0

Phone #: (909)487-1840

As of: 04/06/2005 Riverside County

Program Name: PINE RIDGE TREATMENT CENTERS.-PALM DESERT
Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED
Address: 77-734 COUNTRY CLUB DRIVE, SUITE F3
City, State: PALM DESERT, CA 92211Record ID: 330035AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)200-1339

Program Name: CASA LAS PALMAS RECOVERY HOME Record ID: 330037AN

Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUC Service Type: RES
Address: 83-844 HOPI AVENUE Resident Capacity: 7
City, State: INDIO, CA 92201 Total Occupancy: 7

Phone #: (760)347-9442

Program Name: CASA CECILIA RECOVERY HOME Record ID: 330037BN

Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUC Service Type: RES Address: 83-385 ROSA AVENUE Resident Capacity: 6 City, State: THERMAL, CA 92274 Total Occupancy: 6

Phone #: (760)347-9442

Program Name: CASA LAS PALMAS II Record ID: 330037CN

Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUC Service Type: RES
Address: 77595 CHIHUAHUA STREET Resident Capacity: 6
City, State: LA QUINTA, CA 92253- Total Occupancy: 6

Phone #: (760)347-9442

Program Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM
Legal Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM
Address: 623 NORTH MAIN STREET, SUITE D-11
City, State: CORONA, CA 91720
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)737-2962

Program Name: RECOVERY OPPORTUNITY CENTER Record ID: 330023GN

Legal Name:RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAMService Type:NONAddress:3768 TENTH STREETResident Capacity:0City, State:RIVERSIDE, CA 92501-Total Occupancy:0

Phone #: (909)275-0525

Program Name: DESERT DRUG COURT Record ID: 330023HN

Legal Name:RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAMService Type:NONAddress:68-615 PEREZ ROAD, SUITE 2AResident Capacity:0City, State:CATHEDRAL CITY, CA 92234-Total Occupancy:0

Phone #: (760)770-2213

Program Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM Record ID: 330023CN Legal Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM Service Type: NON

Address: 1827 ATLANTA AVENUE, SUITE D-1

City, State: RIVERSIDE, CA 92507

Resident Capacity: 0

Total Occupancy: 0

Phone #: (909)955-2105

As of: 04/06/2005 Riverside County

Program Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM Record ID: 330023BN Legal Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM Service Type: NON Address: 650 NORTH STATE STREET Resident Capacity: 0

City, State: HEMET, CA 92543
Total Occupancy: 0

Phone #: (909)791-3350

Program Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM

Legal Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM

Address: 1297 WEST HORSONWAY

Recident Capacity: 0

Address: 1297 WEST HOBSONWAY

City, State: BLYTHE, CA 92225-1423

Resident Capacity: 0

Total Occupancy: 0

Phone #: (760)921-5000

Program Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM
Legal Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM
Service Type: NON

Address: 83-912 AVENUE 45 SUITE 9
Resident Capacity: 0

Address: 83-912 AVENUE 45, SUITE 9 Resident Capacity: 0 City, State: INDIO, CA 92201 Total Occupancy: 0

Phone #: (760)347-0754

Program Name: OUR HOUSE Record ID: 330009NN

Legal Name: RIVERSIDE RECOVERY RESOURCES

Address: 41060B ACACIA AVENUE

City, State: HEMET, CA 92544

Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (909)766-7969

Program Name: OUR HOUSE Record ID: 330009GN

Legal Name:RIVERSIDE RECOVERY RESOURCESService Type:RESAddress:41044 ACACIA AVENUEResident Capacity:6City, State:HEMET, CA 92544Total Occupancy:6

Phone #: (909)766-7969

Program Name: FIRST STEP HOUSE Record ID: 330009FN

Legal Name:RIVERSIDE RECOVERY RESOURCESService Type:RESAddress:40333-A STETSON AVENUEResident Capacity:6City, State:HEMET, CA 92544Total Occupancy:6

Phone #: (909)658-4466

Program Name: FIRST STEP HOUSE Record ID: 330009EN

Legal Name:RIVERSIDE RECOVERY RESOURCESService Type:RESAddress:40333-B STETSON AVENUEResident Capacity:6City, State:HEMET, CA 92544Total Occupancy:6

Phone #: (909)658-4466

Program Name: FIRST STEP HOUSE Record ID: 330009DN

Legal Name:RIVERSIDE RECOVERY RESOURCESService Type:RESAddress:40331 STETSON AVENUEResident Capacity:6City, State:HEMET, CA 92544Total Occupancy:6

Phone #: (909)658-4466

As of: 04/06/2005 Riverside County

Program Name: FIRST STEP HOUSE Record ID: 330009CN
Legal Name: RIVERSIDE RECOVERY RESOURCES Service Type: RES-DETOX

Address: 40329 STETSON AVENUE Resident Capacity: 4
City, State: HEMET, CA 92544 Total Occupancy: 4

Phone #: (909)658-4466

Program Name: OUR HOUSE Record ID: 330009MN Legal Name: RIVERSIDE RECOVERY RESOURCES Service Type: RES

Address: 41060A ACACIA AVENUE Resident Capacity: 6

City, State: HEMET, CA 92544 Total Occupancy: 6

Phone #: (909)766-7969

Program Name: COMMUNITY RECOVERY CENTER OF LAKE ELSINORE - OMEGA PRC Legal Name: RIVERSIDE RECOVERY RESOURCES Service Type: NON

Address: 565 CHANEY STREET, SUITES A THRU E Resident Capacity: 0

City, State: LAKE ELSINORE, CA 92530
Total Occupancy: 0

Phone #: (909)674-7354

Program Name: OUR HOUSE Record ID: 330009LN Legal Name: RIVERSIDE RECOVERY RESOURCES Service Type: RES

Address: 41056B ACACIA AVENUE Resident Capacity: 6
City, State: HEMET, CA 92544 Total Occupancy: 6

Phone #: (909)766-7969

Program Name: OMEGA PROGRAM
Legal Name: RIVERSIDE RECOVERY RESOURCES
Address: 2055 NORTH PERRIS BOULEVARD, SUITES G-5 AND G-6
City, State: PERRIS, CA 92571Record ID: 330009PN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)940-6061

Program Name: OMEGA PROGRAM Record ID: 330009QN

Legal Name:RIVERSIDE RECOVERY RESOURCESService Type:NONAddress:3757 ELIZABETH STREETResident Capacity:0City, State:RIVERSIDE, CA 92506-Total Occupancy:0

Phone #: (909)788-8211

Program Name: OUR HOUSE Record ID: 330009KN

Legal Name:RIVERSIDE RECOVERY RESOURCESService Type:RESAddress:41056A ACACIA AVENUEResident Capacity:6City, State:HEMET, CA 92544Total Occupancy:6

Phone #: (909)766-7969

Program Name: OUR HOUSE Record ID: 330009IN

Legal Name:RIVERSIDE RECOVERY RESOURCESService Type:RESAddress:41052A AND 41052B ACACIA AVENUEResident Capacity:4City, State:HEMET, CA 92544Total Occupancy:4

Phone #: (909)766-7969

As of: 04/06/2005 Riverside County

Program Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. (TORI Legal Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. Service Type: NON Address: 66-735 MARTINEZ ROAD Resident Capacity: 0

City, State: THERMAL, CA 92274
Total Occupancy: 0

Phone #: (800)717-4476

Program Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. (PECI-Legal Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. Service Type: NON Address: 12784 PECHANGA ROAD Resident Capacity: 0

City, State: TEMECULA, CA 92592Total Occupancy: 0

Phone #: (877)781-0333

Program Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. (MOR Legal Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. Service Type: NON Address: 11555 1/2 POTRERO ROAD Resident Capacity: 0

City, State: BANNING, CA 92220Total Occupancy: 0

Phone #: (800)732-8805

Program Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. (SOB) Record ID: 330057BN Legal Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. Service Type: NON Address: 607 DONNA WAY Resident Capacity: 0

City, State: SAN JACINTO, CA 92383- Total Occupancy: 0

Phone #: (800)851-5816

Program Name: SOROPTIMIST HOUSE OF HOPE #1 Record ID: 330016AN Legal Name: SOROPTIMIST HOUSE OF HOPE, INC. Service Type: RES

Address: 13525 CIELO AZUL WAY Resident Capacity: 6

City, State: DESERT HOT SPRINGS, CA 92240 Total Occupancy: 6

Phone #: (960)329-4673

Program Name: SOROPTIMIST HOUSE OF HOPE #2 Record ID: 330016BN Legal Name: SOROPTIMIST HOUSE OF HOPE, INC. Service Type: RES

Address: 628 SOUTH 8TH STREET Resident Capacity: 5

City, State: BANNING, CA 92220 Total Occupancy: 6

Phone #: (909)849-9491

Program Name: SOUTHWEST FAMILY COUNSELING Record ID: 330048AP Legal Name: STECKDAUB, DON Service Type: NON

Address: 27715 JEFFERSON AVENUE, SUITE 113-B Resident Capacity: 0
City, State: TEMECULA, CA 92590- Total Occupancy: 0

Phone #: (951)699-3644

Program Name:THE HIGH ROAD PROGRAMRecord ID:330050ANLegal Name:THE HIGH ROAD PROGRAMService Type:NONAddress:3579 ARLINGTON AVENUE, SUITE 200Resident Capacity:0

City, State: RIVERSIDE, CA 92506- Total Occupancy: 0

Phone #: (909)781-6762

As of: 04/06/2005 Riverside County

Program Name: THE RANCH
Legal Name: THE RANCH RECOVERY CENTERS, INC.
Record ID: 330003AN
Service Type: RES-DETOX

Address: 7885 ANNANDALE AVENUE Resident Capacity: 46
City, State: DESERT HOT SPRINGS, CA 92240-1419 Total Occupancy: 46

Phone #: (760)329-2924

Program Name: HACIENDA VALDEZ Record ID: 330003BN

Legal Name: THE RANCH RECOVERY CENTERS, INC. Service Type: RES-DETOX

Address: 12890 QUINTA WAY

City, State: DESERT HOT SPRINGS, CA 92240-4852

Resident Capacity: 35

Total Occupancy: 35

Phone #: (760)329-2959

Program Name: VALLEY-WIDE OUTREACH SERVICES Record ID: 330046AN

Legal Name: VALLEY-WIDE RECREATION AND PARK DISTRICT

Address: 901 WEST ESPLANADE AVENUE

City, State: SAN JACINTO, CA 92582
Total Occupancy: 0

Phone #: (951)654-2026

Program Name: METCALF RECOVERY RANCH Record ID: 330020AN

Legal Name: VARP, INC.

Address: 9826 18TH AVENUE

City, State: BLYTHE, CA 92225

Service Type: RES

Resident Capacity: 18

Total Occupancy: 18

Phone #: (909)922-8625

Program Name: MEN'S ANNEX Record ID: 330004DN

Legal Name:WHITESIDE MANORService Type:RESAddress:2759 AND 2791 ORANGE STREETResident Capacity:6City, State:RIVERSIDE, CA 92501Total Occupancy:10

Phone #: (909)686-9454

Program Name: JANET STREET Record ID: 330004ON
Legal Name: WHITESIDE MANOR Service Type: RES-DETOX

Address: 8567, 8589, AND 8605 JANET STREET

City, State: RIVERSIDE, CA 92501

Resident Capacity: 18

Total Occupancy: 18

Phone #: (909)686-9454

Program Name: MEN'S SUBSTANCE ABUSE RECOVERY HOME Record ID: 330004AN

Legal Name: WHITESIDE MANOR Service Type: RES-DETOX

Address: 2709 AND 2743 ORANGE STREET Resident Capacity: 22 City, State: RIVERSIDE, CA 92501 Total Occupancy: 22

Phone #: (909)686-9454

Program Name: WHITESIDE MANOR OUTPATIENT PROGRAM Record ID: 330004UN

Legal Name:WHITESIDE MANORService Type:NONAddress:1660 CHICAGO, SUITE M-5Resident Capacity:0City, State:RIVERSIDE, CA 92507-Total Occupancy:0

Phone #: (909)788-9515

As of: 04/06/2005 Riverside County

Program Name: WILSHIRE HOUSE Record ID: 330004TN
Legal Name: WHITESIDE MANOR Service Type: RES-DETOX

Address: 2452 AND 2456 WILSHIRE

City, State: RIVERSIDE, CA 92501
Total Occupancy: 12

Phone #: (909)686-9454

Program Name: CHALLEN APARTMENTS Record ID: 330004QN
Legal Name: WHITESIDE MANOR Service Type: RES-DETOX

Address: 5919, 5925, 5929 AND 5935 CHALLEN AVENUE Resident Capacity: 12 City, State: RIVERSIDE, CA 92501 Total Occupancy: 12

Phone #: (909)686-9454

Program Name: PALM AVENUE WOMEN'S PROGRAM
Legal Name: WHITESIDE MANOR, INC.
Address: 4750 PALM AVENUE
City, State: RIVERSIDE, CA 92501Record ID: 330004WN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12

Phone #: (909)206-5999

Program Name: BORN FREE Record ID: 330015CN Legal Name: YOUNG WOMENS CHRISTIAN ASSOCIATION OF RIVERSIDE COUNT Service Type: RES
Address: 8310 BAXTER WAY Resident Capacity: 6
City, State: RIVERSIDE, CA 92503- Total Occupancy: 11

Phone #: (909)689-9366

Program Name: YOUTH SERVICE CENTER Record ID: 330065AN Legal Name: YOUTH SERVICE CENTER OF RIVERSIDE Service Type: NON
Address: 4164 BROCKTON AVENUE Resident Capacity: 0
City, State: RIVERSIDE, CA 92501- Total Occupancy: 0

Phone #: (909)683-5193

As of: 04/06/2005 Sacramento County

Program Name: A SECOND CHANCE RECOVERY HOME Record ID: 340068AP Legal Name: A SECOND CHANCE RECOVERY HOME, INC. Service Type: RES

Address: 9045 MEADOWSWEET WAY Resident Capacity: 6
City, State: ELK GROVE, CA 95624- Total Occupancy: 6

Phone #: (916)714-5521

Program Name: A.F.T.E.R. COUNSELING AGENCY
Legal Name: A.F.T.E.R. COUNSELING AGENCY
Address: 5777 MADISON AVENUE, SUITE 240, 624, AND 930
City, State: SACRAMENTO, CA 95841Record ID: 340046AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (916)344-0249

Program Name: ANOTHER CHOICE, ANOTHER CHANCE
Legal Name: ANOTHER CHOICE, ANOTHER CHANCE
Address: 5415 FLORIN ROAD
City, State: SACRAMENTO, CA 95823
Record ID: 340037AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (916)429-7977

Program Name: ANOTHER CHOICE, ANOTHER CHANCE Record ID: 340037CN Legal Name: ANOTHER CHOICE, ANOTHER CHANCE Service Type: NON Address: 2801 ARAMON DRIVE Resident Capacity: 0

City, State: RANCHO CORDOVA, CA 95670- Total Occupancy: 0

Phone #: (916)361-2089

Program Name: ALPHA OAKS Record ID: 340001AN
Legal Name: ASSOCIATED REHABILITATION PROGRAM FOR WOMEN, INC.
Service Type: RES-DETOX

Address: 8400 FAIR OAKS BOULEVARD Resident Capacity: 20 City, State: CARMICHAEL, CA 95608 Total Occupancy: 20

Phone #: (916)944-3920

Program Name: CORNERSTONE Record ID: 340001CN

Legal Name: ASSOCIATED REHABILITATION PROGRAM FOR WOMEN, INC.

Address: 6350 APPIAN WAY

City, State: CARMICHAEL, CA 95608
Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (916)966-5102

Program Name: CORNERSTONE Record ID: 340001BN

Legal Name:ASSOCIATED REHABILITATION PROGRAM FOR WOMEN, INC.Service Type:RESAddress:6348 APPIAN WAYResident Capacity:6City, State:CARMICHAEL, CA 95608-Total Occupancy:6

Phone #: (916)966-5102

Program Name: BRIDGES PROFESSIONAL TREATMENT SERVICES
Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES
Address: 1422 28TH STREET, SUITE A
City, State: SACRAMENTO, CA 95816Record ID: 340041AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (916)450-0700

As of: 04/06/2005 Sacramento County

Program Name: BRIDGES, INC., "THE PROMISE HOUSE" Record ID: 340041BN Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES, INC. Service Type: RES Address: 2727 P STREET Resident Capacity: 25

City, State: SACRAMENTO, CA 95816Total Occupancy: 25

Phone #: (916)450-0700

Program Name: NEW DAWN RECOVERY CENTER Record ID: 340039BP
Legal Name: CDT SERVICE CORPORATION Service Type: RES-DETOX

Address: 6039, 6043, AND 6045 ROLOFF WAY

City, State: ORANGEVALE, CA 95662
Total Occupancy: 21

Phone #: (916)989-1675

Program Name: NEW DAWN RECOVERY CENTER Record ID: 340039AP Legal Name: CDT SERVICE CORPORATION Service Type: NON
Address: 7447 ANTELOPE ROAD, SUITE 101 Resident Capacity: 0
City, State: CITRUS HEIGHTS, CA 95621- Total Occupancy: 0

Phone #: (916)723-1319

Program Name: CENTER POINT Record ID: 340048AN Legal Name: CENTER POINT, INC. Service Type: RES

Address: 11228 FAIR OAKS BOULEVARD Resident Capacity: 31

City, State: FAIR OAKS, CA 95628- Total Occupancy: 31

Phone #: (916)962-2800

Program Name: CHEMICAL DEPENDENCY CENTER FOR WOMEN - OUTPATIENT Record ID: 340022BN

Legal Name:CHEMICAL DEPENDENCY CENTER FOR WOMENService Type:NONAddress:1507 21ST STREET, SUITE 100Resident Capacity:0City, State:SACRAMENTO, CA 95814Total Occupancy:0

Phone #: (916)448-2951

Program Name: OPTIONS FOR RECOVERY - PASSAGES
Legal Name: CHEMICAL DEPENDENCY CENTER FOR WOMEN
Address: 7000 FRANKLIN BOULEVARD, SUITE 110
City, State: SACRAMENTO, CA 95823Record ID: 340022CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (916)395-3552

Program Name: CHRISTIAN PARTNERSHIP, INC.
Legal Name: CHRISTIAN PARTNERSHIP, INC.
Address: 2251 FLORIN ROAD, SUITE 136
City, State: SACRAMENTO, CA 95822Record ID: 340056AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (916)424-4470

Program Name: CLEAN AND SOBER DETOX Record ID: 340067AN Legal Name: CLEAN AND SOBER DETOX, A CALIFORNIA NON-PROFIT CORPORAT Service Type: RES-DETOX

Address: 8946 MADISON AVENUE Resident Capacity: 6

City, State: FAIR OAKS, CA 95628-4010 Total Occupancy: 6

Phone #: (916)965-3386

As of: 04/06/2005 Sacramento County

Program Name: SACRAMENTO SOLUTIONS Record ID: 340047AN Legal Name: COMMUNITY CONNECTION RESOURCE CENTER Service Type: NON Address: 1831 I STREET Resident Capacity: 0

City, State: SACRAMENTO, CA 95816
Total Occupancy: 0

Phone #: (916)552-5980

Program Name: SACRAMENTO COUNTY DRUG COURT Record ID: 340038AN Legal Name: COUNTY OF SACRAMENTO PROBATION DEPARTMENT Service Type: NON Address: 2140 STOCKTON BOULEVARD Resident Capacity: 0
City, State: SACRAMENTO, CA 95817- Total Occupancy: 0

Phone #: (916)875-1194

Program Name: D & A DETOX CENTER Record ID: 340035CN
Legal Name: D & A DETOX CENTER Service Type: RES-DETOX

Address: 2721 BARBERA WAY Resident Capacity: 6
City, State: RANCHO CORDOVA, CA 95670 Total Occupancy: 6

Phone #: (916)364-7660

Program Name: DIOGENES YOUTH SERVICES Record ID: 340062AN Legal Name: DIOGENES YOUTH SERVICES Service Type: NON
Address: 9719 LINCOLN VILLAGE DRIVE, SUITE 203 Resident Capacity: 0
City, State: SACRAMENTO, CA 95827- Total Occupancy: 0

Phone #: (916)369-5447

Program Name: EL HOGAR MENTAL HEALTH AND COMMUNITY SERVICE CENTER O Record ID: 340051AN Legal Name: EL HOGAR MENTAL HEALTH AND COMMUNITY SERVICE CENTER O Service Type: NON Address: 608 AND 610 TENTH STREET Resident Capacity: 0 City, State: SACRAMENTO, CA 95814- Total Occupancy: 0

Phone #: (916)441-2933

Program Name: FAMILY SERVICE AGENCY OF GREATER SACRAMENTO Record ID: 340057AN Legal Name: FAMILY SERVICE AGENCY ASSOCIATION OF THE GREATER SACRAM Service Type: NON Address: 8912 VOLUNTEER LANE, SUITE 100 Resident Capacity: 0 City, State: SACRAMENTO, CA 95826- Total Occupancy: 0

Phone #: (916)368-3080

Program Name: GATEWAY HOUSE Record ID: 340003AN Legal Name: GATEWAY FOUNDATION, INC. Service Type: RES

Address: 4049 MILLER WAY Resident Capacity: 14

City, State: SACRAMENTO, CA 95817 Total Occupancy: 14

Phone #: (916)451-9312

Program Name:12 WAYS TO SUCCESSRecord ID:340070ANLegal Name:JUVENILES AT RISKService Type:NONAddress:2245 FLORIN ROADResident Capacity:0City, State:SACRAMENTO, CA 95822-Total Occupancy:0

Phone #: (916)392-5277

As of: 04/06/2005 Sacramento County

Program Name: KOINONIA GROUP HOME #5 Record ID: 340063AN Legal Name: KOINONIA FOSTER HOMES, INC. Service Type: NON Address: 4232 BIG CLOUD WAY Resident Capacity: 0 Total Occupancy: 0

Phone #: (916)652-0171

Program Name: MERCY PERINATAL RECOVERY NETWORK (PRN)

Legal Name: MERCY HEALTHCARE SACRAMENTO

Address: 650 HOWE AVENUE, SUITE 400

City, State: SACRAMENTO, CA 95825
Total Occupancy: 0

Phone #: (916)733-6354

Program Name: MI CASA RECOVERY HOME Record ID: 340004BN Legal Name: MEXICAN AMERICAN ALCOHOLISM PROGRAM, INC. Service Type: RES

Address: 2515 48TH AVENUE Resident Capacity: 20

City, State: SACRAMENTO, CA 95822 Total Occupancy: 20

Phone #: (916)394-2328

Program Name: MI CASA - OUTPATIENT PROGRAM
Legal Name: MEXICAN AMERICAN ALCOHOLISM PROGRAM, INC.
Address: 2515 48TH AVENUE
City, State: SACRAMENTO, CA 95822
Record ID: 340004CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (916)394-2320

Program Name: MAAP COUNSELING CENTER Record ID: 340004EN Legal Name: MEXICAN AMERICAN ALCOHOLISM PROGRAM, INC. Service Type: NON Address: 3437 MYRTLE AVENUE, SUITE 420 Resident Capacity: 0 City, State: SACRAMENTO, CA 95660- Total Occupancy: 0

Phone #: (916)338-6835

Program Name: MAAP COUNSELING CENTER Record ID: 340004DN Legal Name: MEXICAN AMERICAN ALCOHOLISM PROGRAM, INC. Service Type: NON Address: 4241 FLORIN ROAD, SUITE 110 Resident Capacity: 0 City, State: SACRAMENTO, CA 95823- Total Occupancy: 0

Phone #: (916)394-2320

Program Name: NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE, IN Legal Name: NAT'L COUNCIL ON ALCOHOLISM & DRUG DEPENDENCE, INC. SACF Service Type: NON Address: 1300 ETHAN WAY, SUITE 250 Resident Capacity: 0 City, State: SACRAMENTO, CA 95825- Total Occupancy: 0

Phone #: (916)922-9217

Program Name: OAK HOUSE TREATMENT PROGRAM II Record ID: 340013AP
Legal Name: OAK HOUSE CORPORATION Service Type: RES-DETOX

Address: 7919 OAK AVENUE Resident Capacity: 9
City, State: CITRUS HEIGHTS, CA 95610 Total Occupancy: 10

Phone #: (916)721-9699

As of: 04/06/2005 Sacramento County

Program Name:OAK HOUSE IRecord ID:340013BPLegal Name:OAK HOUSE CORPORATIONService Type:RESAddress:7987 OAK AVENUEResident Capacity:6City, State:CITRUS HEIGHTS, CA 95610Total Occupancy:6

Phone #: (916)721-9699

Program Name: PANACEA, INC. - COMPREHENSIVE DRUG AND ALCOHOL TREATME! Record ID: 340064AP Legal Name: PANACEA, INC. Service Type: NON
Address: 3353 BRADSHAW ROAD, SUITE 103 Resident Capacity: 0
City, State: SACRAMENTO, CA 95827- Total Occupancy: 0

Phone #: (916)857-1570

Program Name: ALTUA Record ID: 340002AN Legal Name: RIVER CITY RECOVERY CENTER, INC. Service Type: RES

Address: 12490 ALTA MESA ROAD Resident Capacity: 80

City, State: GALT, CA 95632 Total Occupancy: 80

Phone #: (209)748-2470

Program Name: STARLIGHT Record ID: 340002BN Legal Name: RIVER CITY RECOVERY CENTER, INC. Service Type: RES

Address: 2218 E STREET Resident Capacity: 24

City, State: SACRAMENTO, CA 95816 Total Occupancy: 24

Phone #: (916)442-3979

Program Name:GRACE HOUSERecord ID:340002CNLegal Name:RIVER CITY RECOVERY CENTER, INC.Service Type:RESAddress:2217 G STREETResident Capacity:15City, State:SACRAMENTO, CA 95816Total Occupancy:15

Phone #: (916)442-3979

Program Name: SACRAMENTO AREA EMERGENCY HOUSING CENTER
Legal Name: SACRAMENTO AREA EMERGENCY HOUSING CENTER
Address: 2925 34TH STREET
City, State: SACRAMENTO, CA 95817Record ID: 340045AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (916)454-2120

Program Name: SACRAMENTO AREA EMERGENCY HOUSING CENTER
Legal Name: SACRAMENTO AREA EMERGENCY HOUSING CENTER
Address: 4516 PARKER AVENUE
City, State: SACRAMENTO, CA 95816Record ID: 340045BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (916)455-2160

Program Name: SACRAMENTO BLACK ALCOHOLISM CENTER Record ID: 340008AN Legal Name: SACRAMENTO BLACK ALCOHOLISM CENTER Service Type: NON Address: 3307 BROADWAY AVENUE, SUITE 200 Resident Capacity: 0 City, State: SACRAMENTO, CA 95817 Total Occupancy: 0

Phone #: (916)454-4242

As of: 04/06/2005 Sacramento County

Program Name: SACRAMENTO RECOVERY HOUSE Record ID: 340009AN Legal Name: SACRAMENTO RECOVERY HOUSE, INC. Service Type: RES

Address: 1914 22ND STREET Resident Capacity: 15

City, State: SACRAMENTO, CA 95816 Total Occupancy: 18

Phone #: (916)455-6258

Program Name: FAIR OAKS RECOVERY CENTER
Legal Name: SOCIAL HEALTH AND ADDICTION RECOVERY PROGRAM
Address: 8304, 8312, 8324 MADISON AVENUE, AND 5350 CHICAGO AVENU
City, State: FAIR OAKS, CA 95628

Record ID: 340033AN
Service Type: RES
Total Occupancy: 28

Phone #: (916)863-1606

Program Name: FAIR OAKS RECOVERY CENTER
Legal Name: SOCIAL HEALTH AND ADDICTION RECOVERY PROGRAM
Address: 8312 MADISON AVENUE
City, State: FAIR OAKS, CA 95628
Record ID: 340033BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (916)863-1606

Program Name: SWANSTON PALMS RECOVERY, INC.

Legal Name: SWANSTON PALMS RECOVERY, INC.

Address: 3889 7TH AVENUE

City, State: SACRAMENTO, CA 95817
Record ID: 340065AN

Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (916)448-7265

Program Name: CARES ALCOHOL AND OTHER DRUG OUTPATIENT PROGRAM
Legal Name: THE CENTER FOR A.I.D.S. RESEARCH, EDUCATION AND SERVICES - Service Type: NON
Address: 1500 21ST STREET
City, State: SACRAMENTO, CA 95814- Total Occupancy: 0

Phone #: (916)443-3299

Program Name: ALTERNATIVE HOUSE Record ID: 340015AN Legal Name: THE EFFORT, INC. Service Type: RES

Address: 1550 JULIESSE AVENUE Resident Capacity: 40

City, State: SACRAMENTO, CA 95815 Total Occupancy: 40

Phone #: (916)739-1764

Program Name: THE EFFORT DETOXIFICATION CENTER Record ID: 340015EN
Legal Name: THE EFFORT, INC. Service Type: RES-DETOX

Address: 7586 STOCKTON BOULEVARD Resident Capacity: 18
City, State: SACRAMENTO, CA 95823- Total Occupancy: 18

Phone #: (916)691-3417

Program Name: CRISIS INTAKE AND COUNSELING CENTER Record ID: 340015CN
Legal Name: THE EFFORT, INC. Service Type: NON
Address: 1820 J STREET Resident Capacity: 0

City, State: SACRAMENTO, CA 95814 Total Occupancy: 0

Phone #: (916)444-6294

As of: 04/06/2005 Sacramento County

Program Name: HOUSE OF UMOJA/RAFA PROJECT Record ID: 340066AN Legal Name: THE GIFTED HEALING CENTER Service Type: RES

Address: 3509 1ST AVENUE Resident Capacity: 5

City, State: SACRAMENTO, CA 95817- Total Occupancy: 6

Phone #: (916)454-3199

Program Name: SACRAMENTO VETERANS RESOURCE CENTER
Legal Name: VIETNAM VETERANS OF CALIFORNIA, INC.
Address: 7270 EAST SOUTHGATE DRIVE, BUILDING 3
City, State: SACRAMENTO, CA 95823Total Occupancy: 32

Phone #: (916)393-8387

Program Name: SACRAMENTO VETERANS RESOURCE CENTER'S OUTPATIENT SUBS' Record ID: 340058BN Legal Name: VIETNAM VETERANS OF CALIFORNIA, INC. Service Type: NON Address: 7270 EAST SOUTHGATE DRIVE Resident Capacity: 0
City, State: SACRAMENTO, CA 95823- Total Occupancy: 0

Phone #: (916)393-8387

Program Name: OPTIONS FOR RECOVERY - RESIDENTIAL TREATMENT PROGRAM Record ID: 340018AN Legal Name: VOLUNTEERS OF AMERICA GREATER SACRAMENTO AND NORTHEF Service Type: RES Address: P. O. BOX 38369 Resident Capacity: 24 City, State: SACRAMENTO, CA 95838 Total Occupancy: 36

Phone #: (916)929-1951

Program Name: VOLUNTEERS OF AMERICA PATHWAYS PROGRAM Record ID: 340018EN Legal Name: VOLUNTEERS OF AMERICA GREATER SACRAMENTO AND NORTHEF Service Type: NON Address: 1590 NORTH A STREET Resident Capacity: 0 City, State: SACRAMENTO, CA 95814- Total Occupancy: 0

Phone #: (916)874-4351

Program Name: COMPREHENSIVE ALCOHOL TREATMENT CENTER Record ID: 340018DN Legal Name: VOLUNTEERS OF AMERICA GREATER SACRAMENTO AND NORTHEF Service Type: RES

Address: 700 NORTH 5TH STREET, ROOMS 200, 300, 500, AND 700-704 Resident Capacity: 32

City, State: SACRAMENTO, CA 95814- Total Occupancy: 32

Phone #: (916)448-1236

Record ID: 350001AN Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

As of: 04/06/2005

Program Name: SAN BENITO COUNTY SUBSTANCE ABUSE PROGRAM

Legal Name: SAN BENITO COUNTY

Address: 1111 SAN FELIPE ROAD, SUITE 108

City, State: HOLLISTER, CA 95023-

Phone #: (831)637-5594

As of: 04/06/2005

San Bernardino County

Program Name: CENTER FOR COMMUNITY COUNSELING AND EDUCATION
Legal Name: AGAPE COUNSELING CENTER

Record ID: 360014AN
Service Type: NON

Address: 1535 EAST HIGHLAND AVENUE, SUITE A & B Resident Capacity: 0
City, State: SAN BERNARDINO, CA 92404 Total Occupancy: 0

Phone #: (909)881-3443

Program Name: BILINGUAL FAMILY COUNSELING SERVICE, INC.
Legal Name: BILINGUAL FAMILY COUNSELING SERVICE, INCORPORATED
Address: 311, 313, AND 317 WEST F STREET
Record ID: 360062AN
Service Type: NON
Resident Capacity: 0

City, State: ONTARIO, CA 91762- Total Occupancy: 0

Phone #: (909)986-7111

Program Name: CASA DE SAN BERNARDINO-ODF PROGRAM
Legal Name: CASA DE SAN BERNARDINO, INC.

Address: 735 NORTH D STREET

Resident Capacity: 0

Address: 735 NORTH D STREET Resident Capacity: 0
City, State: SAN BERNARDINO, CA 92401 Total Occupancy: 0

Phone #: (909)381-5507

Program Name: CHINO PERINATAL SUBSTANCE ABUSE PROGRAM Record ID: 360050GN Legal Name: DEPARTMENT OF BEHAVIORAL HEALTH SAN BERNARDINO COUNT Service Type: NON

Address: 6180 RIVERSIDE DRIVE, SUITE H, RMS 1, 6, 9-18, 21, 24, & 29-31 Resident Capacity: 0

City, State: CHINO, CA 91710- Total Occupancy: 0

Phone #: (909)590-5355

Program Name: DAP RECOVERY HOME Record ID: 360021BN

Legal Name:DRUG ALTERNATIVE PROGRAMService Type:RESAddress:11810 KINGSTON STREETResident Capacity:6City, State:GRAND TERRACE, CA 92313Total Occupancy:7

Phone #: (909)783-1094

Program Name: FAMILY SERVICE AGENCY SUBSTANCE ABUSE PROGRAM
Legal Name: FAMILY SERVICE AGENCY OF SAN BERNARDINO
Address: 1669 NORTH E STREET
Resident Capacity: 0

City, State: SAN BERNARDINO, CA 92405
Total Occupancy: 0

Phone #: (909)886-6737

Program Name: CREST FOREST FAMILY SERVICE: DRUG AND ALCOHOL PROGRAM Record ID: 360044DN

Legal Name: FAMILY SERVICE AGENCY OF SAN BERNARDINO

Address: 23406 CREST FOREST DRIVE

City, State: CRESTLINE, CA 92325
Total Occupancy: 0

Phone #: (909)338-4689

Program Name: NEW CREATION ALCOHOL AND DRUG COUNSELING SERVICES Record ID: 360054AP

Legal Name:G AND C SWAN INC.Service Type:NONAddress:120 WEST 9TH STREET, ROOM T3Resident Capacity:0City, State:UPLAND, CA 91786-Total Occupancy:0

Phone #: (909)981-6121

As of: 04/06/2005 San Bernardino County

Program Name: HASE AND ASSOCIATES SYSTEMS, INCORPORATED (HASI)
Legal Name: HASE AND ASSOCIATES SYSTEMS, INCORPORATED

Address: 353 WEST SIXTH STREET
City, State: SAN BERNARDINO, CA 92401
Record ID: 360052BP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)888-0149

Program Name: HELP THE PEOPLE FOUNDATION Record ID: 360063AN Legal Name: HELP THE PEOPLE FOUNDATION Service Type: NON
Address: 15402 WEST SAGE, SUITE 101 Resident Capacity: 0
City, State: VICTORVILLE, CA 92392- Total Occupancy: 0

Phone #: (909)548-0872

Program Name: OASIS COUNSELING CENTERS Record ID: 360027AN Legal Name: HI-DESERT MENTAL HEALTH CENTER Service Type: NON Address: 309 EAST MOUNTAIN VIEW, SUITE 100 Resident Capacity: 0 City, State: BARSTOW, CA 92311 Total Occupancy: 0

Phone #: (760)256-0376

Program Name: OASIS COUNSELING CENTERS Record ID: 360027BN Legal Name: HI-DESERT MENTAL HEALTH CENTER Service Type: NON
Address: 15447 ANACAPA, SUITE 200 Resident Capacity: 0
City, State: VICTORVILLE, CA 92392- Total Occupancy: 0

Phone #: (760)245-9446

Program Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTE Record ID: 360030AN Legal Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER Service Type: NON Address: 16248 VICTOR STREET Resident Capacity: 0

City, State: VICTORVILLE, CA 92392 Total Occupancy: 0

Phone #: (760)243-7151

Program Name:IMPETUS INCORPORATEDRecord ID:360045ANLegal Name:IMPETUS, INC.Service Type:NONAddress:12560 CENTRAL AVENUEResident Capacity:0City, State:CHINO, CA 91710-Total Occupancy:0

Phone #: (909)591-4761

Program Name: INLAND BEHAVIORAL AND HEALTH SERVICES, INC.
Legal Name: INLAND BEHAVIORAL AND HEALTH SERVICES, INC.
Address: 1963 NORTH E STREET
City, State: SAN BERNARDINO, CA 92405
Record ID: 360015AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)881-6146

Program Name: ORANGE RECOVERY HOME Record ID: 360001BN Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES Service Type: RES
Address: 1003 NORTH ORANGE AVENUE Resident Capacity: 6
City, State: ONTARIO, CA 91764 Total Occupancy: 6

Phone #: (909)932-1069

As of: 04/06/2005 San Bernardino County

Program Name: MARIN RECOVERY HOME Record ID: 360001CN Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES Service Type: RES

Address: 1636 MARIN AVENUE Resident Capacity: 6

City, State: ONTARIO, CA 91764 Phone #: (909)932-1069

Program Name: DETOX CENTER Record ID: 360001GN

Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES Service Type: RES-DETOX

Total Occupancy: 6

Address: 1439 WEST ARROW HIGHWAY Resident Capacity: 6
City, State: UPLAND, CA 91786- Total Occupancy: 6

Phone #: (909)932-1069

Program Name: WOMEN'S RESIDENTIAL SERVICES Record ID: 360001ZN

Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES

Service Type: RES

Address: 1260 ARROW HIGHWAY, BUILDING C
City, State: UPLAND, CA 91786
Total Occupancy: 75

Phone #: (909)932-1069

Program Name: RECOVERY CENTER Record ID: 360001AAN

Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES Service Type: NON

Address: 934 NORTH MOUNTAIN AVENUE, SUITES A & B

City, State: UPLAND, CA 91786
Total Occupancy: 0

Phone #: (909)949-4667

Program Name: CAROLINE HOUSE Record ID: 360001EN

Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES

Address: 1646 CAROLINE STREET

City, State: ONTARIO, CA 91764

Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (909)985-1776

Program Name: JERICHO OUTREACH - MEN'S HOME Record ID: 360009AN

Legal Name: JERICHO OUTREACH, INC.

Service Type: RES-DETOX

P. 11. C. 11.

Address: 5135, 5151 F STREET, AND 13369 5TH STREET

City, State: CHINO, CA 91710

Resident Capacity: 14

Total Occupancy: 14

Phone #: (909)591-9077

Program Name: MATRIX INSTITUTE ON ADDICTIONS Record ID: 360020AN Legal Name: MATRIX INSTITUTE ON ADDICTIONS Service Type: NON

Address: 9375 ARCHIBALD AVENUE, SUITES 204 AND 311 Resident Capacity: 0
City, State: RANCHO CUCAMONGA, CA 91730 Total Occupancy: 0

Phone #: (909)989-9724

Program Name: PRIDE Record ID: 360033AN

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 595 NORTH ARROWHEAD AVENUE, SUITE B, ROOMS 10-12

City State SAN REPNAR DATE: 0

City, State: SAN BERNARDINO, CA 92401 Total Occupancy: 0

Phone #: (909)381-8151

As of: 04/06/2005 San Bernardino County

Program Name: BARSTOW CENTER FOR CHANGE Record ID: 360033KN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON
Address: 200 EAST WILLIAMS Resident Capacity: 0
City, State: BARSTOW, CA 92311- Total Occupancy: 0

Phone #: (760)256-9224

Program Name: VICTOR VALLEY CENTER FOR CHANGE
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 15770 MOJAVE DRIVE, SUITES K & L
City, State: VICTORVILLE, CA 92392Record ID: 360033BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)843-7809

Program Name: REDLANDS DRUG COURT Record ID: 360033DN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON Address: 802 WEST COLTON AVENUE, SUITE C Resident Capacity: 0
City, State: REDLANDS, CA 92374- Total Occupancy: 0

Phone #: (909)335-2989

Program Name: PEGASUS DAY REHAB. - TAURUS
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1874 BUSINESS CENTER DRIVE
City, State: SAN BERNARDINO, CA 92408Record ID: 360033GN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)890-1523

Program Name: CENTRAL VALLEY REGIONAL RECOVERY CENTER Record ID: 360033HN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON Address: 1076 SANTO ANTONIO AVENUE, SUITES B & C Resident Capacity: 0

Total Occupancy: 0

City, State: COLTON, CA 92324-

Phone #: (909)433-9824

Program Name: FONTANA REGIONAL RECOVERY CENTER

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Record ID: 360033LN

Service Type: NON

Address: 7993 SIERRA AVENUE, SUITES L & K
City, State: FONTANA, CA 92336Total Occupancy: 0

Phone #: (909)822-8720

Program Name: NEEDLES CENTER FOR CHANGE
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Record ID: 360033IN
Service Type: NON

Address: 300 H STREET

City, State: NEEDLES, CA 92363
Total Occupancy: 0

Phone #: (760)326-4590

Program Name: FONTANA CENTER FOR CHANGE Record ID: 360033JN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON Address: 7965 SIERRA AVENUE, SUITE L Resident Capacity: 0

Address: 7965 SIERRA AVENUE, SUITE L Resident Capacity: 0
City, State: FONTANA, CA 92336- Total Occupancy: 0

Phone #: (909)357-4585

As of: 04/06/2005 San Bernardino County

Program Name: REDLANDS COUNSELING CENTER Record ID: 360033FN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON Address: 802 WEST COLTON AVENUE, SUITE D Resident Capacity: 0 City, State: REDLANDS, CA 92374- Total Occupancy: 0

Phone #: (909)335-2989

Program Name: MERRILL COMMUNITY SERVICES Record ID: 360016AN Legal Name: MERRILL COMMUNITY SERVICES, INC. Service Type: NON
Address: 8627 WHEELER AVENUE Resident Capacity: 0
City, State: FONTANA, CA 92335 Total Occupancy: 0

Phone #: (909)823-0609

Program Name: MIRACLES IN RECOVERY, INC.
Legal Name: MIRACLES IN RECOVERY, INC.
Address: 2107 NORTH SIERRA WAY
City, State: SAN BERNARDINO, CA 92404Record ID: 360056CN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7

Phone #: (909)883-3318

Program Name: MIRACLES IN RECOVERY, INC.
Legal Name: MIRACLES IN RECOVERY, INC.
Address: 1064 NORTH D STREET
City, State: SAN BERNARDINO, CA 92410Record ID: 360056AN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7

Phone #: (909)381-3974

Program Name: NEW HOUSE, INC. Record ID: 360005AN Legal Name: NEW HOUSE, INC. Service Type: RES

Address: 840,850,850 A and B NORTH ARROWHEAD AVENUE Resident Capacity: 29

City, State: SAN BERNARDINO, CA 92401 Total Occupancy: 29

Phone #: (909)881-0389

Program Name: NEW HOUSE, INC. Record ID: 360005DN Legal Name: NEW HOUSE, INC. Service Type: RES

Address: 364 A EAST ORANGE SHOW ROAD
City, State: SAN BERNARDINO, CA 92408-2414

Total Occupancy: 6

Phone #: (909)890-1772

Program Name: NEW HOUSE, INC. Record ID: 360005CN Legal Name: NEW HOUSE, INC. Service Type: RES

Address: 364 EAST ORANGE SHOW ROAD
City, State: SAN BERNARDINO, CA 92408-2414
Total Occupancy: 6

Phone #: (909)881-0390

Program Name: NEW HOUSE, INC.

Legal Name: NEW HOUSE, INC.

Address: 856, 856-1, 856-2, AND 856-3 NORTH ARROWHEAD AVENUE

Record ID: 360005BN
Service Type: RES
Resident Capacity: 23

Address: 856, 856-1, 856-2, AND 856-3 NORTH ARROWHEAD AVENUE Resident Capacity: 23
City, State: SAN BERNARDINO, CA 92401 Total Occupancy: 23

Phone #: (909)881-0389

As of: 04/06/2005 San Bernardino County

Program Name: STEPPING STONES TO RECOVERY
Legal Name: ONE-2-ONE MENTORS
Address: 16245 DESERT KNOLL DRIVE
City, State: VICTORVILLE, CA 92392Record ID: 360059AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)245-1997

Program Name: OPERATION BREAKTHROUGH
Legal Name: OPERATION BREAKTHROUGH
Address: 40880 PEDDER ROAD
City, State: BIG BEAR LAKE, CA 92315

Record ID: 360031AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (909)866-5437

Program Name: TASK (TEEN ALCOHOL AND SUBSTANCE KARE)

Legal Name: PEOPLE'S CHOICE, INC.

Address: 1505 WEST HIGHLAND AVENUE, SUITES 4 AND 5

Resident Capacity: 0

Address: 1505 WEST HIGHLAND AVENUE, SUITES 4 AND 5 Resident Capacity: 0
City, State: SAN BERNARDINO, CA 92411- Total Occupancy: 0

Phone #: (909)887-3524

Program Name: PEOPLE'S CHOICE, INC. ABSOLUTE FREEDOM

Legal Name: PEOPLE'S CHOICE, INC.

Record ID: 360046BN

Service Type: NON

Legal Name: PEOPLE'S CHOICE, INC.

Address: 16519 VICTOR STREET, SUITE 305

City, State: VICTORVILLE, CA 92392
Total Occupancy: 0

Phone #: (760)843-7723

Program Name: PINE RIDGE TREATMENT CENTER Record ID: 360007AP

Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED

Address: 2727 HIGHLAND DRIVE

City, State: RUNNING SPRINGS, CA 92382

Service Type: RES

Resident Capacity: 19

Total Occupancy: 19

Phone #: (909)867-7028

Program Name: PINE RIDGE TREATMENT CENTERS, INC. - VICTORVILLE
Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED

Address: 15367 BONANZA ROAD, #A
City, State: VICTORVILLE, CA 92392

Record ID: 360007BP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)955-1012

Program Name: PINE RIDGE TREATMENT CENTERS, INC. - SAN BERNARDINO Record ID: 360007CP

Legal Name:PINE RIDGE TREATMENT CENTER, INCORPORATEDService Type:NONAddress:1881 COMMERCENTER EAST, SUITE 114Resident Capacity:0City, State:SAN BERNARDINO, CA 92408Total Occupancy:0

Phone #: (909)383-8809

Program Name: PINE RIDGE TREATMENT CENTER - LUCERNE VALLEY

Legal Name: PINE RIDGE TREATMENT CENTERS, INCORPORATED

Record ID: 360007DP

Service Type: RES-DETOX

Address: 9401 CRYSTAL CREEK ROAD Resident Capacity: 24
City, State: LUCERNE VALLEY, CA 92356- Total Occupancy: 24

Phone #: (760)248-9199

As of: 04/06/2005 San Bernardino County

Program Name: R.A.P. COMMUNITY RECOVERY SERVICES Record ID: 360051AN Legal Name: R.A.P. COMMUNITY RECOVERY SERVICES Service Type: NON
Address: 17205 ARROW BOULEVARD Resident Capacity: 0
City, State: FONTANA, CA 92335- Total Occupancy: 0

Phone #: (909)357-6439

Program Name: REDLANDS ADULT SCHOOL - SUBSTANCE ABUSE RECOVERY AND F
Legal Name: REDLANDS UNIFIED SCHOOL DISTRICT
Record ID: 360057AN
Service Type: NON

Address: 932 WEST CYPRESS AVENUE Resident Capacity: 0 City, State: REDLANDS, CA 92373- Total Occupancy: 0

Phone #: (909)748-6930

Program Name: YUCAIPA GUIDANCE CENTER DBA VISTA GUIDANCE CENTERS Record ID: 360023AN Legal Name: REDLANDS-YUCAIPA GUIDANCE CLINIC ASSOCIATION, INC.

Address: 34324 YUCAIPA BOULEVARD, SUITES B, C, AND D Resident Capacity: 0

Total Occupancy: 0

Phone #: (909)335-7067

City, State: YUCAIPA, CA 92399

Program Name: SUBSTANCE ABUSE PROGRAM
Legal Name: REDLANDS-YUCAIPA GUIDANCE CLINIC ASSOCIATION, INC.

Record ID: 360023BN
Service Type: NON

Address: 1323 WEST COLTON AVENUE, SUITES 100, 105, 210, AND 215

City, State: REDLANDS, CA 92375

Resident Capacity: 0

Total Occupancy: 0

Phone #: (909)335-7067

Program Name: VISTA RECOVERY CENTER Record ID: 360023DN

Legal Name: REDLANDS-YUCAIPA GUIDANCE CLINIC ASSOCIATION, INC.

Address: 939 AND 955-1/2 NORTH D STREET

City, State: SAN BERNADINO, CA 92418
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (909)381-5100

Program Name: HIGHLAND GUIDANCE CENTER Record ID: 360023CN

Legal Name: REDLANDS-YUCAIPA GUIDANCE CLINIC ASSOCIATION, INC.

Address: 3694 HIGHLAND AVENUE, SUITES 19, 23, 24

City, State: HIGHLAND, CA 92346
Total Occupancy: 0

Phone #: (909)335-7067

Program Name: RIM FAMILY SERVICES Record ID: 360036AN Legal Name: RIM FAMILY SERVICES, INC. Service Type: NON
Address: 28545 HIGHWAY 18 Resident Capacity: 0
City, State: SKYFOREST, CA 92385 Total Occupancy: 0

Phone #: (909)336-1800

Program Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. (SAN Record ID: 360058AN

Legal Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC.

Address: 2210 EAST HIGHLAND AVENUE, SUITE 107

City, State: SAN BERNARDINO, CA 92404
Total Occupancy: 0

Phone #: (909)864-1097

As of: 04/06/2005 San Bernardino County

Program Name: PERINATAL SUBSTANCE ABUSE TREATMENT SERVICES Record ID: 360050AN Legal Name: SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT Service Type: NON Address: 850 FOOTHILL BOULEVARD, SUITE A Resident Capacity: 0

Total Occupancy: 0

City, State: RIALTO, CA 92376-Phone #: (909)421-9206

Program Name: VICTOR VALLEY PERINATAL TREATMENT CENTER Record ID: 360050BN

Legal Name: SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT Service Type: NON

Address: 11951 HESPERIA ROAD Resident Capacity: 0
City, State: HESPERIA, CA 92345- Total Occupancy: 0

Phone #: (909)956-6780

Program Name: VICTOR VALLEY BEHAVIORAL HEALTH CENTER Record ID: 360050DN

Legal Name: SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT Service Type: NON Address: 12625 HESPERIA ROAD, ROOMS B4, C5, C6, E1 AND E9 - E12 Resident Capacity: 0 City, State: VICTORVILLE, CA 92392- Total Occupancy: 0

Phone #: (760)955-1777

Program Name: OFFICE OF ALCOHOL AND DRUG PROGRAMS TREATMENT SERVICE Record ID: 360050CN

Legal Name: SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT Service Type: NON

Address: 850 EAST FOOTHILL BOULEVARD, SUITE E Resident Capacity: 0
City, State: RIALTO, CA 92376- Total Occupancy: 0

Phone #: (909)421-9465

Program Name: SAN BERNARDINO COUNTY - BARSTOW ADS Record ID: 360050EN

Legal Name: SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALT Service Type: NON

Address: 805 EAST MT. VIEW STREET Resident Capacity: 0
City, State: BARSTOW, CA 92311- Total Occupancy: 0

Phone #: (760)256-5026

Program Name: LUCERNE VALLEY COUNSELING AND BEHAVIORAL HEALTH CENTF Record ID: 360050FN

Legal Name: SAN BERNARDINO COUNTY, DEPARTMENT OF BEHAVIORAL HEALI Service Type: NON Address: 32700 OLD WOMAN SPRINGS ROAD Resident Capacity: 0

City, State: LUCERNE VALLEY, CA 92356
Total Occupancy: 0

Phone #: (760)248-6612

Program Name: SHANDIN HILLS BEHAVIORAL THERAPY CENTER Record ID: 360055AP

Legal Name:SHANDIN HILLS REHABILITATION CENTERService Type:RESAddress:4164 NORTH FOURTH AVENUEResident Capacity:0City, State:SAN BERNARDINO, CA 92407-2996Total Occupancy:0

Phone #: (909)886-6786

Program Name: CEDAR HOUSE REHABILITATION CENTER Record ID: 360002DN Legal Name: SOCIAL SCIENCE SERVICES, INC. Service Type: RES-DETOX

Address: 18612 SANTA ANA AVENUE Resident Capacity: 125

City, State: BLOOMINGTON, CA 92316

Total Occupancy: 125

Phone #: (909)421-7120

As of: 04/06/2005 San Bernardino County

Program Name: CEDAR HOUSE REHABILITATION CENTER, WOMEN AND CHILDREN
Legal Name: SOCIAL SCIENCE SERVICES, INC.
Record ID: 360002FN
Service Type: RES

Address: 10888 MAPLE AVENUE Resident Capacity: 11
City, State: BLOOMINGTON, CA 92316- Total Occupancy: 26

Phone #: (909)873-0478

Program Name: CEDAR HOUSE REHABILITATION CENTER Record ID: 360002CN Legal Name: SOCIAL SCIENCE SERVICES, INC. Service Type: NON

Address: 18612 SANTA ANA AVENUE Resident Capacity: 0
City, State: BLOOMINGTON, CA 92316 Total Occupancy: 0

Phone #: (909)421-7120

Program Name: ST. JOHN OF GOD HEALTH CARE SERVICES Record ID: 360003HN

Legal Name: ST. JOHN OF GOD HEALTH CARE SERVICES Service Type: RES-DETOX

Address: 13333 PALMDALE ROAD Resident Capacity: 66
City, State: VICTORVILLE, CA 92392- Total Occupancy: 82

Phone #: (760)241-4917

Program Name: ST. JOHN OF GOD HEALTH CARE SERVICES Record ID: 360003IN Legal Name: ST. JOHN OF GOD HEALTH CARE SERVICES Service Type: NON

Address: 15534 6TH STREET Resident Capacity: 0
City, State: VICTORVILLE, CA 92392- Total Occupancy: 0

Phone #: (760)241-4917

Program Name: JOSHUA TREE DRUG COURT Record ID: 360006CN

Legal Name: THE MORONGO BASIN MENTAL HEALTH SERVICES ASSOCIATION Service Type: NON Address: 61605 29 PALMS HIGHWAY, SUITE A Resident Capacity: 0 City, State: JOSHUA TREE, CA 92252- Total Occupancy: 0

Phone #: (760)366-8641

Program Name: PANORAMA RANCH

Record ID: 360006AN

Land Name: THE MORONGO BASIN MENTAL HEALTH SERVICES ASSOCIATION I. Sorvice Type: RES DETO:

Legal Name: THE MORONGO BASIN MENTAL HEALTH SERVICES ASSOCIATION, I Service Type: RES-DETOX

Address: 65675 SULLIVAN ROAD Resident Capacity: 30 City, State: JOSHUA TREE, CA 92252 Total Occupancy: 30

Phone #: (760)366-9100

Program Name: PANORAMA RANCH Record ID: 360006BN

Legal Name: THE MORONGO BASIN MENTAL HEALTH SERVICES ASSOCIATION, I Service Type: NON Address: 55475 SANTA FE TRAIL, ROOMS 11-13, 15, 18-20, 22, 23, AND 23A Resident Capacity: 0 City, State: YUCCA VALLEY, CA 92284- Total Occupancy: 0

Phone #: (760)365-3022

Program Name: VALLEY IMPROVEMENT PROGRAMS, INC.

Legal Name: VALLEY IMPROVEMENT PROGRAMS, INC.

Record ID: 360049CP

Service Type: NON

Legal Name:VALLEY IMPROVEMENT PROGRAMS, INC.Service Type:NOAddress:210 WEST B STREETResident Capacity:0City, State:ONTARIO, CA 91762-Total Occupancy:0

Phone #: (909)987-4036

As of: 04/06/2005 San Bernardino County

Program Name: VALLEY IMPROVEMENT PROGRAMS, INC.

Legal Name: VALLEY IMPROVEMENT PROGRAMS, INC.

Address: 8540 ARCHIBALD AVENUE, SUITE A, BUILDING 18

City, State: RANCHO CUCAMONGA, CA 91730
Record ID: 360049AP

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (909)987-4036

Program Name: VALLEY IMPROVEMENT PROGRAMS, INC.

Legal Name: VALLEY IMPROVEMENT PROGRAMS, INC.

Address: 1589 WEST 9TH STREET, SUITE E

City, State: UPLAND, CA 91786
Record ID: 360049BP

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (909)987-4036

Program Name: RIALTO HOUSE Record ID: 360004HN Legal Name: VARP, INC. Service Type: RES

Address: 921 RIALTO AVENUE Resident Capacity: 6
City, State: SAN BERNARDINO, CA 92410 Total Occupancy: 7

Phone #: (909)381-3774

Program Name: STODDARD HOUSE II
Legal Name: VARP, INC.
Record ID: 360004GN
Service Type: RES

Address: 1087 NORTH STODDARD STREET

City, State: SAN BERNARDINO, CA 92410

Set Vice Type: RES

Resident Capacity: 6

Total Occupancy: 7

Phone #: (909)381-3774

Program Name: GIBSON WOMEN'S PHASE II HOUSE Record ID: 360004IN Legal Name: VARP, INC. Service Type: RES

Address: 1139 NORTH D STREET Resident Capacity: 6

Address: 1139 NORTH D STREET Resident Capacity: 6
City, State: SAN BERNARDINO, CA 92410- Total Occupancy: 7

Phone #: (909)888-6956

Program Name: WOMEN'S R-4 PHASE II/B HOUSE Record ID: 360004JN

Legal Name: VARP, INC. Service Type: RES

Address: 1149 NORTH D STREET Resident Capacity: 6
City, State: SAN BERNARDINO, CA 92410- Total Occupancy: 7

Phone #: (909)888-6956

Program Name: REARICK I HOUSE Record ID: 360004KN

Legal Name:VARP, INC.Service Type:RESAddress:384 11TH STREETResident Capacity:6City, State:SAN BERNARDINO, CA 92410-Total Occupancy:7

Phone #: (909)888-6956

Program Name: REARICK II HOUSE Record ID: 360004LN

Legal Name: VARP, INC.

Address: 382 11TH STREET

City State: SAN BERNARDING CA 92410
Total Occupancy: 7

City, State: SAN BERNARDINO, CA 92410- Total Occupancy: 7

Phone #: (909)888-6956

As of: 04/06/2005 San Bernardino County

Program Name: READING HOUSE I Record ID: 360004MN Legal Name: VARP, INC. Service Type: RES

Address: 1103 NORTH D STREET Resident Capacity: 6
City, State: SAN BERNARDINO, CA 92410- Total Occupancy: 7

Phone #: (909)888-6956

Program Name: READING HOUSE II Record ID: 360004NN Legal Name: VARP, INC. Service Type: RES

Address: 1107 NORTH D STREET Resident Capacity: 6

Address: 1107 NORTH D STREET Resident Capacity: 6
City, State: SAN BERNARDINO, CA 92410- Total Occupancy: 7

Phone #: (909)888-6956

Program Name: ELEVENTH STREET "B" HOUSE Record ID: 360004EN

Legal Name:VARP, INC.Service Type:RESAddress:349 11TH STREETResident Capacity:6City, State:SAN BERNARDINO, CA 92410Total Occupancy:7

Phone #: (909)381-3774

Program Name: GIBSON HOUSE FOR MEN Record ID: 360004BN

Legal Name: VARP, INC.

Address: 1100 NORTH D STREET

City, State: SAN BERNARDINO, CA 92410

Service Type: RES

Resident Capacity: 40

Total Occupancy: 40

Phone #: (909)381-3774

Program Name: HARRIS HOUSE Record ID: 360004AN Legal Name: VARP, INC. Service Type: RES

Legal Name: VARP, INC. Service Type: RES
Address: 907 WEST RIALTO AVENUE
City, State: SAN BERNARDINO, CA 92410
Total Occupancy: 15

Phone #: (909)381-4053

Program Name: GIBSON HOUSE RECOVERY CENTER FOR WOMEN Record ID: 360004FN

Legal Name: VARP, INC. Service Type: RES

Address: 1135 NORTH D STREET Resident Capacity: 16
City, State: SAN BERNARDINO, CA 92410 Total Occupancy: 18

Phone #: (909)888-6956

As of: 04/06/2005 San Diego County

Program Name: CASA RAPHAEL Record ID: 370073AN Legal Name: ALPHA PROJECT FOR THE HOMELESS, INC. Service Type: RES

Address: 975 AND 993 POSTAL WAY Resident Capacity: 140

City, State: VISTA, CA 92083Total Occupancy: 140

Phone #: (760)630-9922

Program Name: AA & E RETREAT Record ID: 370092AP

Legal Name: AMERICAN STITCH, LLC (D.B.A. CHOICES, USA)

Service Type: RES-DETOX

Address: 30651 CAMINO DE LAS LOMAS Resident Capacity: 6
City, State: ESCONDIDO, CA 92026- Total Occupancy: 6

Phone #: (760)751-2889

Program Name: GALVESTON HOUSE Record ID: 370096CP

Legal Name: BAY RECOVERY CENTERS, INC. Service Type: RES-DETOX

Address: 2436 GALVESTON STREET Resident Capacity: 6
City, State: SAN DIEGO, CA 92110- Total Occupancy: 6

Phone #: (619)275-5309

Program Name: CARING MINISTRIES Record ID: 370029KN

Legal Name:CARING MINISTRIES OF SAN DIEGOService Type:RESAddress:525 GRAND AVENUEResident Capacity:43City, State:SPRING VALLEY, CA 91977-Total Occupancy:56

Phone #: (619)461-3009

Program Name: FAMILY FOUNDATIONS PROGRAM Record ID: 370075AN

Legal Name:CENTER POINT, INC.Service Type:RESAddress:3050 ARMSTRONG AVENUEResident Capacity:35City, State:SAN DIEGO, CA 92111-Total Occupancy:75

Phone #: (858)467-6701

Program Name: FREEDOM HOUSE Record ID: 370036AN

Legal Name:COMMUNITY CONNECTION RESOURCE CENTERService Type:RESAddress:4304, 4318, 4320, AND 4322 LOUISIANA STREETResident Capacity:20City, State:SAN DIEGO, CA 92104Total Occupancy:20

Phone #: (619)542-0452

Program Name: FREEDOM HOUSE IMPERIAL Record ID: 370036LN

Legal Name: COMMUNITY CONNECTION RESOURCE CENTER

Address: 4997 IMPERIAL AVENUE AND 4996 HOLLY DRIVE

City, State: SAN DIEGO, CA 92113
Total Occupancy: 0

Phone #: (619)263-2306

Program Name: CCRC RESIDENTIAL Record ID: 370036HN

Legal Name:COMMUNITY CONNECTION RESOURCE CENTERService Type:RESAddress:3571 AND 3573 FAIRMONT AVENUEResident Capacity:6City, State:SAN DIEGO, CA 92105-Total Occupancy:6

Phone #: (619)542-0452

As of: 04/06/2005 San Diego County

Program Name: CCRC RESIDENTIAL Record ID: 370036IN Legal Name: COMMUNITY CONNECTION RESOURCE CENTER Service Type: RES

Address: 3577 AND 3579 FAIRMONT AVENUE Resident Capacity: 6

City, State: SAN DIEGO, CA 92105- Total Occupancy: 6

Phone #: (619)542-0452

Program Name: SOLUTIONS Record ID: 370036EN

Legal Name: COMMUNITY CONNECTION RESOURCE CENTER

Address: 4080 CENTRE STREET

City, State: SAN DIEGO, CA 92103

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (619)294-7800

Program Name: CCRC RESIDENTIAL Record ID: 370036KN

Legal Name: COMMUNITY CONNECTION RESOURCE CENTER

Address: 3565 AND 3567 FAIRMONT AVENUE

City, State: SAN DIEGO, CA 92105
Total Occupancy: 6

Phone #: (619)542-0452

Program Name: CCRC RESIDENTIAL Record ID: 370036JN

Legal Name:COMMUNITY CONNECTION RESOURCE CENTERService Type:RESAddress:3581 FAIRMONT AVENUEResident Capacity:6City, State:SAN DIEGO, CA 92105-Total Occupancy:6

Phone #: (619)542-0452

Program Name: SHORT TERM I--MARLBOROUGH Record ID: 370024IN

Legal Name:CRASH, INC.Service Type:RESAddress:4161 MARLBOROUGH AVENUEResident Capacity:50City, State:SAN DIEGO, CA 92105Total Occupancy:50

Phone #: (619)282-7274

Program Name: TIM HUDDLESTON REGIONAL RECOVERY CENTER Record ID: 370024NN

Legal Name: CRASH, INC. Service Type: NON

Address: 220 NORTH FUCLID AVENUE SUITE 120 AND 130

Resident Capacity: 0

Address: 220 NORTH EUCLID AVENUE, SUITE 120 AND 130 Resident Capacity: 0
City, State: SAN DIEGO, CA 92114- Total Occupancy: 0

Phone #: (619)263-6663

Program Name: CRASH, INC., OPTIONS CENTRAL Record ID: 370024MN

Legal Name: CRASH, INC.

Address: 5605 EL CAJON BOULEVARD

City, State: SAN DIEGO, CA 92115
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (619)229-8201

Program Name: GOLDEN HILL HOUSE Record ID: 370024LN

Legal Name: CRASH, INC.Service Type: RESAddress: 2410 E STREETResident Capacity: 43City, State: SAN DIEGO, CA 92102-Total Occupancy: 43

Phone #: (619)239-9691

San Diego County As of: 04/06/2005

Program Name: SHORT TERM II Record ID: 370024JN Legal Name: CRASH, INC. Service Type: RES Resident Capacity: 50 Address: 4890 67TH STREET Total Occupancy: 65 City, State: SAN DIEGO, CA 92115

Phone #: (619)464-6207

Program Name: GOLDEN HILL HOUSE II Record ID: 370024KN Legal Name: CRASH, INC. Service Type: RES Address: 446 26TH STREET, FIFTH FLOOR Resident Capacity: 63 Total Occupancy: 63

Phone #: (619)239-9691

City, State: SAN DIEGO, CA 92102-

Program Name: EMPOWERMENT CENTER AND SEMINARS Record ID: 370095AN Service Type: NON Legal Name: EMPOWERMENT CENTER AND SEMINARS Resident Capacity: 0 Address: 3443 CAMINO DEL RIO SOUTH, SUITE 112 City, State: SAN DIEGO, CA 92108-Total Occupancy: 0

Phone #: (619)892-0225

Program Name: AMITY FOUNDATION OF CALIFORNIA Record ID: 370059AN Service Type: RES Legal Name: EPIDAURUS Address: 2260 WATSON WAY Resident Capacity: 50 Total Occupancy: 50 City, State: VISTA, CA 92083

Phone #: (760)599-1892

Record ID: 370078AN Program Name: MID-CITY REGIONAL RECOVERY CENTER Service Type: NON Legal Name: EPISCOPAL COMMUNITY SERVICE Resident Capacity: 0 Address: 4305 UNIVERSITY AVENUE, 4TH FLOOR Total Occupancy: 0 City, State: SAN DIEGO, CA 92104-

Phone #: (619)228-2870

Record ID: 370101AP Program Name: LASTING RECOVERY Service Type: NON Legal Name: FARKAS AND SAALINGER, PSYCHOLOGY CORP. Address: 6046 CORNERSTONE COURT, SUITES 111, 112, & 113 Resident Capacity: 0 Total Occupancy: 0 City, State: SAN DIEGO, CA 92121-

Phone #: (858)453-4315

Record ID: 370098BN Program Name: CALVARY RANCH CHRISTIAN DRUG AND ALCOHOL RECOVERY FAC

Legal Name: GOD'S HOUSE MINISTRIES, INC. Service Type: RES Address: 11137 MORENO AVENUE Resident Capacity: 8 Total Occupancy: 8 City, State: LAKESIDE, CA 92040-

Phone #: (619)561-2599

Record ID: 370098AN Program Name: CALVARY RANCH CHRISTIAN DRUG AND ALCOHOL RECOVERY FAC

Service Type: RES Legal Name: GOD'S HOUSE MINISTRIES, INC.

Address: 13610 WILLOW ROAD Resident Capacity: 20 City, State: LAKESIDE, CA 92040-Total Occupancy: 20

Phone #: (619)561-2599

As of: 04/06/2005 San Diego County

Program Name:PEMARRORecord ID:370025ANLegal Name:GROUP CONSCIENCEService Type:RESAddress:1482 KINGS VILLA ROADResident Capacity:10City, State:RAMONA, CA 92065Total Occupancy:10

Phone #: (760)789-8070

Program Name: THE LIGHTHOUSE COMMUNITY Record ID: 370094AP
Legal Name: HEALTHCARE SERVICES, INC. Service Type: RES-DETOX

Address: 528, 542, 552, 554, AND 558 14TH STREET Resident Capacity: 106
City, State: SAN DIEGO, CA 92101- Total Occupancy: 106

Phone #: (619)515-0243

Program Name: HOME STRETCH RESIDENTIAL IN RECOVERY
Legal Name: HOME STRETCH RESIDENTIAL IN RECOVERY PROGRAM

Record ID: 370079AP
Service Type: RES

Address: 4989 EL CAJON BOULEVARD, UNITS 1 AND 10 Resident Capacity: 6
City, State: SAN DIEGO, CA 92115- Total Occupancy: 6

Phone #: (619)287-2588

Program Name: COGNITIVE BEHAVIORAL RECOVERY

Record ID: 370084AP

Legal Name: HORVATH, ARTHUR THOMAS

Address: 8950 VILLA LA JOLLA DRIVE, SUITES 1130 AND 1131

City, State: LA JOLLA, CA 92037-1705

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (858)453-4777

Program Name: MALE SOBER LIVING Record ID: 370021HN

Legal Name:HOUSE OF METAMORPHOSIS, INC.Service Type:RESAddress:414 30TH STREETResident Capacity:6City, State:SAN DIEGO, CA 92102Total Occupancy:6

Phone #: (619)236-9217

Program Name: HOUSE OF METAMORPHOSIS Record ID: 370021AN Legal Name: HOUSE OF METAMORPHOSIS, INC. Service Type: RES

Address: 2970 MARKET STREET Resident Capacity: 64

City, State: SAN DIEGO, CA 92102 Resident Capacity: 64

Total Occupancy: 64

Phone #: (619)236-9492

Program Name: P-3 HOUSE II Record ID: 370021GN

Legal Name:HOUSE OF METAMORPHOSIS, INC.Service Type:RESAddress:412-30TH STREETResident Capacity:6City, State:SAN DIEGO, CA 92102Total Occupancy:6

Phone #: (619)236-9217

Program Name: WOMEN'S RE-ENTRY HOUSE Record ID: 370021FN
Legal Name: HOUSE OF METAMORPHOSIS, INC. Service Type: RES

Address: 408 30TH STREET, UNIT A

City, State: SAN DIEGO, CA 92102

Resident Capacity: 6

Total Occupancy: 6

Phone #: (619)236-9217

San Diego County As of: 04/06/2005

Program Name: HOUSE OF METAMORPHOSIS TRANSITIONAL LIVING FACILITY Record ID: 370021KN Legal Name: HOUSE OF METAMORPHOSIS, INC. Service Type: RES

Resident Capacity: 6 Address: 2867 C STREET Total Occupancy: 6 City, State: SAN DIEGO, CA 92102-

Phone #: (619)236-9217

Program Name: HOUSE OF METAMORPHOSIS TRANSITIONAL LIVING FACILITY Record ID: 370021MN

Legal Name: HOUSE OF METAMORPHOSIS, INC. Service Type: RES Resident Capacity: 6 Address: 2871 C STREET Total Occupancy: 6 City, State: SAN DIEGO, CA 92102-

Phone #: (619)236-9217

Program Name: HOUSE OF METAMORPHOSIS TRANSITIONAL LIVING FACILITY Record ID: 370021IN

Service Type: RES Legal Name: HOUSE OF METAMORPHOSIS, INC. Resident Capacity: 6 Address: 410 30TH STREET

Total Occupancy: 6 City, State: SAN DIEGO, CA 92102-

Phone #: (619)236-9217

Program Name: HOUSE OF METAMORPHOSIS TRANSITIONAL LIVING FACILITY Record ID: 370021JN

Service Type: RES Legal Name: HOUSE OF METAMORPHOSIS, INC.

Address: 2865 C STREET Resident Capacity: 6 Total Occupancy: 6 City, State: SAN DIEGO, CA 92102-

Phone #: (619)236-9217

Record ID: 370021LN Program Name: HOUSE OF METAMORPHOSIS TRANSITIONAL LIVING FACILITY

Service Type: RES Legal Name: HOUSE OF METAMORPHOSIS, INC. Address: 2869 C STREET Resident Capacity: 6 City, State: SAN DIEGO, CA 92102-Total Occupancy: 6

Phone #: (619)236-9217

Record ID: 370021DN Program Name: MEN'S RE-ENTRY HOUSE

Service Type: RES Legal Name: HOUSE OF METAMORPHOSIS, INC. Address: 3021 G STREET Resident Capacity: 6 Total Occupancy: 6 City, State: SAN DIEGO, CA 92102

Phone #: (619)236-9217

Record ID: 370055AP Program Name: RAND RECOVERY CENTERS - UNITY HOUSE I

Legal Name: JERRY NEIL RAND, M.D., A PROFESSIONAL MEDICAL CORPORATIO Service Type: RES-DETOX

Address: 3598 TICONDEROGA STREET Resident Capacity: 6 Total Occupancy: 6 City, State: SAN DIEGO, CA 92117

Phone #: (858)490-3460

Record ID: 370060AP Program Name: RANCHO L'ABRI Service Type: RES-DETOX Legal Name: LOS SAUZALES, INC.

Address: 18091 BEE CANYON ROAD Resident Capacity: 34

City, State: DULZURA, CA 91917 Total Occupancy: 34

Phone #: (619)468-9333

As of: 04/06/2005 San Diego County

Program Name: NORTH COASTAL REGIONAL RECOVERY CENTER
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 2821 OCEANSIDE BOULEVARD
City, State: OCEANSIDE, CA 92054
Resident Capacity: 0
Total Occupancy: 0

Phone #: (619)000-0000

Program Name: MCALISTER INSTITUTE SIGNS OF LIFE
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Address: 4327 OHIO STREET
Record ID: 370045YN
Service Type: NON
Resident Capacity: 0

Total Occupancy: 0

Phone #: (619)442-0277

City, State: SAN DIEGO, CA 92104-

Program Name: MCALISTER INSTITUTE-NORTH COUNTY DETOXIFICATION CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Record ID: 370045EN

Service Type: RES-DETOX

Address: 4010 VIA SERRA Resident Capacity: 6
City, State: OCEANSIDE, CA 92056 Total Occupancy: 6

Phone #: (619)442-0277

Program Name: MCALISTER INSTITUTE GROUP HOME-EAST Record ID: 370045MN

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 2219 ODESSA COURT

City, State: LEMON GROVE, CA 91945
Service Type: DSS

Resident Capacity: 0

Total Occupancy: 0

Phone #: (619)498-0827

Program Name: EAST COUNTY REGIONAL RECOVERY CENTER Record ID: 370045DN

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 1365 NORTH JOHNSON AVENUE, SUITES 107-113

City, State: EL CAJON, CA 92020

Total Occupancy: 0

Phone #: (619)440-4801

Program Name: MCALISTER INSTITUTE GROUP HOME NORTH Record ID: 370045QN

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 3744 SANTA YNEZ

City, State: OCEANSIDE, CA 92056
Service Type: DSS

Resident Capacity: 0

Total Occupancy: 0

Phone #: (760)806-1495

Program Name: NORTH CITY TEEN RECOVERY CENTER Record ID: 370045PN

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 6904 MIRAMAR ROAD, SUITE 105

City, State: SAN DIEGO, CA 92121
Total Occupancy: 0

Phone #: (858)578-5612

Program Name: MC ALISTER INSTITUTE - LEMON GROVE FACILITY Record ID: 370045FN
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.
Service Type: RES-DETOX

Address: 2049 SKYLINE DRIVE Resident Capacity: 145 City, State: LEMON GROVE, CA 91945 Total Occupancy: 145

Phone #: (619)465-7303

As of: 04/06/2005 San Diego County

Program Name: MCALISTER INSTITUTE GROUP HOME - SOUTH
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

A 11 and 7571 STEIN CORR STREET.

Address: 7571 STURGESS STREET Resident Capacity: 0
City, State: LA MESA, CA 91941- Total Occupancy: 0

Phone #: (619)337-3830

Program Name: MCALISTER INSTITUTE EAST COUNTY RECOVERY ANNEX
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Record ID: 370045ZN
Service Type: NON

Address: 8790 CUYAMACA STREET, SUITE H

City, State: SANTEE, CA 92071
Total Occupancy: 0

Phone #: (619)442-0277

Program Name: MCALISTER INSTITUTE OPTIONS SOUTH BAY Record ID: 370045BN

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC. Service Type: NON

Address: 251 PALOMAR, SUITES A, C, AND D

City, State: CHULA VISTA, CA 91911

Resident Capacity: 0

Total Occupancy: 0

Phone #: (619)498-0908

Program Name: EAST COUNTY REGIONAL RECOVERY CENTER Record ID: 370045TN

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC. Service Type: NON

Address: 1385 NORTH JOHNSON AVENUE, SUITES 102/103 Resident Capacity: 0
City, State: EL CAJON, CA 92020- Total Occupancy: 0

Phone #: (619)441-2493

Program Name: NORTH COUNTY ADOLESCENT SERVICES Record ID: 370045AAN

Legal Name: MCALISTER INSTITUTE FOR TREATMENT AND EDUCATION Service Type: NON

Address: 560 GREENBRIAR DRIVE, SUITE 104 Resident Capacity: 0
City, State: OCEANSIDE, CA 92054- Total Occupancy: 0

Phone #: (760)722-8200

Program Name: EAST COUNTY CENTER FOR CHANGE Record ID: 370069BN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON Address: 1357 BROADWAY, SUITE 100 Resident Capacity: 0

City, State: EL CAJON, CA 92021
Total Occupancy: 0

Phone #: (619)588-1989

Program Name: FAMILY TREATMENT CENTER Record ID: 370069NN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON Address: 1010 EAST VISTA WAY, SUITE G, H & I Resident Capacity: 0

City, State: VISTA, CA 92083- Total Occupancy: 0
Phone #: (760)630-4573

Program Name: SOUTH COUNTY CENTER FOR CHANGE

Legal Name:MENTAL HEALTH SYSTEMS, INC.Service Type:NONAddress:1515 PALM AVENUE, SUITE AResident Capacity:0City, State:SAN DIEGO, CA 92154-Total Occupancy:0

Record ID: 370069QN

Phone #: (619)429-4117

As of: 04/06/2005 San Diego County

Program Name:FAMILY RECOVERY CENTERRecord ID:370069TNLegal Name:MENTAL HEALTH SYSTEMS, INC.Service Type:RESAddress:1100 SPORTFISHER DRIVEResident Capacity:55City, State:OCEANSIDE, CA 92054-Total Occupancy:90

Phone #: (858)573-2600

Program Name: KINESIS NORTH Record ID: 370069SN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON
Address: 474 WEST VERMONT AVENUE, SUITE 102 Resident Capacity: 0
City, State: ESCONDIDO, CA 92025- Total Occupancy: 0

Phone #: (760)480-2255

Program Name: TEEN RECOVERY PROGRAM - SAN MARCOS
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 150 VALPREDA ROAD, SUITE 105
City, State: SAN MARCOS, CA 92069Total Occupancy: 0

Phone #: (760)744-3672

Program Name: MID-COAST REGIONAL RECOVERY CENTER
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 3340 KEMPER STREET, SUITES 105 AND 207
City, State: SAN DIEGO, CA 92110Resident Capacity: 0
Total Occupancy: 0

Phone #: (619)276-1207

Program Name: NORTH RURAL REGIONAL RECOVERY CENTER
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 323 HUNTER STREET
City, State: RAMONA, CA 92065Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)788-6246

Program Name: PROVIDENCE PLACE Record ID: 370069AN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: RES
Address: 446 26TH STREET, 4TH FLR, 3RD FLR INFANT, TODDLER & OFFIC Resident Capacity: 80
City, State: SAN DIEGO, CA 92101- Total Occupancy: 100

Phone #: (858)689-2633

Program Name: NORTH COUNTY CENTER FOR CHANGE Record ID: 370069CN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON
Address: 1855 EAST VISTA WAY, SUITES 8, 9 & 10 Resident Capacity: 0
City, State: VISTA, CA 92084- Total Occupancy: 0

Phone #: (760)940-1836

Program Name: HARMONY WOMEN'S RECOVERY CENTER Record ID: 370069MN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON
Address: 6244 EL CAJON BOULEVARD, SUITES 15, 16, AND 18 Resident Capacity: 0
City, State: SAN DIEGO, CA 92115- Total Occupancy: 0

Phone #: (619)461-0015

As of: 04/06/2005 San Diego County

Program Name: TEEN RECOVERY CENTER - FALLBROOK
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 302 NORTH BRANDON STREET, #1
City, State: FALLBROOK, CA 92028Record ID: 370069LN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)451-1873

Program Name: PEGASUS EAST Record ID: 370069JN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON

Address: 7841 EL CAJON BOULEVARD Resident Capacity: 0
City, State: LA MESA, CA 91941- Total Occupancy: 0

Phone #: (619)697-2388

Program Name: OPTIONS FOR RECOVERY - VISTA Record ID: 370069HN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON

Address: 1010 EAST VISTA WAY, SUITES D, E, F, AND J

City, State: VISTA, CA 92083
Total Occupancy: 0

Phone #: (760)726-2656

Program Name: NORTH INLAND REGIONAL RECOVERY CENTER Record ID: 370069DN

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 620 NORTH ASH

City, State: ESCONDIDO, CA 92027
Total Occupancy: 0

Phone #: (760)741-7708

Program Name: CENTRAL NORTH REGIONAL RECOVERY CENTER Record ID: 370069WN

Legal Name:MENTAL HEALTH SYSTEMS, INC.Service Type:NONAddress:6693 CONVOY COURTResident Capacity:0City, State:SAN DIEGO, CA 92111-Total Occupancy:0

Phone #: (858)505-0228

Program Name: PACIFIC DRUG TREATMENT FURLOUGH (DTF) Record ID: 370069UN

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 551 SOUTH 35TH STREET, ANNEX BUILDING

City, State: SAN DIEGO, CA 92113
Service Type: RES

Resident Capacity: 64

Total Occupancy: 64

Phone #: (868)573-2600

Program Name: PEGASUS WEST Record ID: 370069PN

Legal Name:MENTAL HEALTH SYSTEMS, INC.Service Type:NONAddress:560 GREENBRIER DRIVE, SUITE BResident Capacity:0City, State:OCEANSIDE, CA 92054-Total Occupancy:0

Phone #: (760)439-2785

Program Name: SOUTH BAY DUAL RECOVERY SERVICES Record ID: 370069VN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON

Address: 1105 BROADWAY, SUITE 207, 208, AND 209
City, State: CHULA VISTA, CA 91911Total Occupancy: 0

Phone #: (619)425-5609

As of: 04/06/2005 San Diego County

Program Name: CASA DE MILAGROS Record ID: 370014AN
Legal Name: METROPOLITAN AREA ADVISORY COMMITTEE ON ANTI-POVERTY Service Type: RES

Address: 1127 SOUTH 38TH STREET

City, State: SAN DIEGO, CA 92113

Resident Capacity: 18

Total Occupancy: 18

Phone #: (619)262-4002

Program Name: NOSOTROS Record ID: 370014BN

Legal Name: METROPOLITAN AREA ADVISORY COMMITTEE ON ANTI-POVERTY : Service Type: RES
Address: 73 NORTH SECOND AVENUE Resident Capacity: 13
City, State: CHULA VISTA, CA 91910 Total Occupancy: 13

Phone #: (619)426-4801

Program Name: OCCUPATIONAL HEALTH SERVICES, INC.

Legal Name: MHN SERVICES

Address: 1637 CAPALINA ROAD

City, State: SAN MARCOS, CA 92069
Record ID: 370099AP

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (760)744-9201

Program Name: NARCONON WARNER SPRINGS Record ID: 370087AN Legal Name: NARCONON SOUTHERN CALIFORNIA Service Type: RES

Address: 35025 HIGHWAY 79 Resident Capacity: 31

City, State: WARNER SPRINGS, CA 92086- Total Occupancy: 31

Phone #: (760)782-0471

Program Name:NATIONAL CROSSROADS/PROJECT S.T.A.R.Record ID:370061APLegal Name:NATIONAL CROSSROADS, INC.Service Type:RESAddress:4991 IMPERIAL AVENUEResident Capacity:42City, State:SAN DIEGO, CA 92113-Total Occupancy:55

Phone #: (619)262-0868

Program Name: NEW ENTRA CASA
Legal Name: NEW ENTRA CASA CORPORATION
Address: 3575 PERSHING AVENUE
City, State: SAN DIEGO, CA 92104Record ID: 370083AN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 10

Phone #: (619)294-4526

Program Name: CASAWORKS DRUG AND ALCOHOL OUTPATIENT TREATMENT PROC Record ID: 370093AN

Legal Name:NORTH COUNTY INTERFAITH COUNCILService Type:NONAddress:425 NORTH DATE STREETResident Capacity:0City, State:ESCONDIDO, CA 92025-Total Occupancy:0

Phone #: (760)746-5857

Program Name: ESCONDIDO COMMUNITY SOBERING SERVICES Record ID: 370093BN Legal Name: NORTH COUNTY INTERFAITH COUNCIL, INC. Service Type: RES

Address: 401 NORTH SPRUCE STREET Resident Capacity: 22

City, State: ESCONDIDO, CA 92025- Total Occupancy: 22

Phone #: (760)747-1553

As of: 04/06/2005 San Diego County

Program Name:NORTH COUNTY SERENITY HOUSERecord ID:370005ANLegal Name:NORTH COUNTY SERENITY HOUSE, INC.Service Type:RESAddress:123 SOUTH ELM STREETResident Capacity:27City, State:ESCONDIDO, CA 92025Total Occupancy:27

Phone #: (760)432-4298

Program Name: EDNA'S HOUSE Record ID: 370005BN Legal Name: NORTH COUNTY SERENITY HOUSE, INC. Service Type: RES

Address: 812 EAST SECOND AVENUE Resident Capacity: 6

City, State: ESCONDIDO, CA 92025- Total Occupancy: 6

Phone #: (760)432-4298

Program Name: BROOK'S HOUSE Record ID: 370005CN
Legal Name: NORTH COUNTY SERENITY HOUSE, INC. Service Type: RES

Address: 842 EAST SECOND AVENUE Resident Capacity: 6
City, State: ESCONDIDO, CA 92025- Total Occupancy: 6

Phone #: (760)432-4298

Program Name: AUSTIN HOUSE Record ID: 370005DN Legal Name: NORTH COUNTY SERENITY HOUSE, INC. Service Type: RES

Address: 701 EAST SECOND AVENUE Resident Capacity: 6
City, State: ESCONDIDO, CA 92025- Total Occupancy: 6

Phone #: (760)432-4298

Program Name:SERENITY TOORecord ID:370005ENLegal Name:NORTH COUNTY SERENITY HOUSE, INC.Service Type:NONAddress:130 SOUTH FIG STREETResident Capacity:0City, State:ESCONDIDO, CA 92025-Total Occupancy:0

Phone #: (760)432-4298

Program Name: VISIONS 1ST PHASE TO RECOVERY PROGRAM (NATALIE'S HOUSE) Record ID: 370005FN Legal Name: NORTH COUNTY SERENITY HOUSE, INC. Service Type: RES

Address: 834 EAST SECOND AVENUE Resident Capacity: 6
City, State: ESCONDIDO, CA 92025- Total Occupancy: 6

Phone #: (760)432-4298

Program Name:SERENITY LODGERecord ID:370005GNLegal Name:NORTH COUNTY SERENITY HOUSE, INC.Service Type:RESAddress:1341 ESCONDIDO AVENUEResident Capacity:110City, State:ESCONDIDO, CA 92025-Total Occupancy:140

Phone #: (760)432-4298

Program Name: CHEMICAL DEPENDENCY INTENSIVE OUTPATIENT PROGRAM
Legal Name: PACIFIC HEALTH SYSTEMS, L.P.
Address: 148 SOUTH ESCONDIDO BOULEVARD
City, State: ESCONDIDO, CA 92025Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)781-3963

As of: 04/06/2005 San Diego County

Program Name: HEALTHY BEGINNINGS/NUEVA ESPERANZA Record ID: 370076AN Legal Name: PARADISE VALLEY HOSPITAL Service Type: NON Address: 2345 EAST EIGHTH STREET, SUITES 108 AND 110 Resident Capacity: 0

Address: 2345 EAST EIGHTH STREET, SUITES 108 AND 110 Resident Capacity: 0
City, State: NATIONAL CITY, CA 91950Total Occupancy: 0

Phone #: (619)470-4384

Program Name: PATHFINDERS Record ID: 370006AN Legal Name: PATHFINDERS OF SAN DIEGO Service Type: RES

Address: 2952 AND 2980 CEDAR STREET, AND 1530 DALE STREET Resident Capacity: 44

City, State: SAN DIEGO, CA 92102

Total Occupancy: 44

Phone #: (619)239-7370

Program Name: PHOENIX HOUSE SAN DIEGO Record ID: 370030BN Legal Name: PHOENIX HOUSE SAN DIEGO, INC. Service Type: DSS

Address: 23981 SHERILTON VALLEY ROAD Resident Capacity: 0
City, State: DESCANSO, CA 91916- Total Occupancy: 0

Phone #: (619)445-0405

Program Name: PHOENIX HOUSE SAN DIEGO BEACH AREA CENTER Record ID: 370030DN Legal Name: PHOENIX HOUSE SAN DIEGO, INC. Service Type: NON Address: 3274 ROSECRANS STREET Resident Capacity: 0

City, State: SAN DIEGO, CA 92110- Total Occupancy: 0

Phone #: (619)226-2663

Program Name: PHOENIX HOUSE SAN DIEGO, INC. - ENCINITAS IMPACT
Legal Name: PHOENIX HOUSE SAN DIEGO, INC.
Address: 681 ENCINITAS BOULEVARD, SUITE 311
City, State: ENCINITAS, CA 92024Record ID: 370030CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)634-7610

Program Name: BACK ON TRACK OUTPATIENT RECOVERY AND TREATMENT PROGI Record ID: 370064BN Legal Name: POSITIVE OPPORTUNITIES FOR WOMEN ENGAGED IN RECOVERY Service Type: NON Address: 7969 BROADWAY Resident Capacity: 0

City, State: LEMON GROVE, CA 91945-1809 Total Occupancy: 0

Phone #: (619)462-4225

Program Name: POST ADOLESCENT RECOVERY CENTER Record ID: 370091AN Legal Name: POST ADOLESCENT RECOVERY CENTER, INC. Service Type: RES

Address: 2534-A EAST WASHINGTON STREET Resident Capacity: 16

City, State: ESCONDIDO, CA 92027- Total Occupancy: 16

Phone #: (760)741-6226

Program Name: PSYCARE INTENSIVE OUTPATIENT PROGRAM

Legal Name: PSYCARE ASSOCIATES, INC.

Record ID: 370074AP

Service Type: NON

Address: 4540 KEARNY VILLA ROAD, SUITE 102

City, State: SAN DIEGO, CA 92123
Total Occupancy: 0

Phone #: (858)279-1223

As of: 04/06/2005 San Diego County

Program Name: R.E.S.T.O.R.E. ALCOHOL AND DRUG TREATMENT PROGRAM
Legal Name: R.E.S.T.O.R.E., INC.

Record ID: 370066AN
Service Type: NON

Address: 4385 FAIRMOUNT AVENUE Resident Capacity: 0
City, State: SAN DIEGO, CA 92115- Total Occupancy: 0

Phone #: (619)563-9247

Program Name: REBUILD Record ID: 370068AP
Legal Name: REBUILD Service Type: NON

Address: 2103 EL CAMINO REAL, SUITE 205 Resident Capacity: 0
City, State: OCEANSIDE, CA 92054- Total Occupancy: 0

Phone #: (760)721-6241

Program Name: SAN DIEGO AMERICAN INDIAN HEALTH CENTER Record ID: 370097AN Legal Name: SAN DIEGO AMERICAN INDIAN HEALTH CENTER Service Type: NON

Address: 2602 FIRST AVENUE, SUITE 100 Resident Capacity: 0
City, State: SAN DIEGO, CA 92103- Total Occupancy: 0

Phone #: (619)234-0648

Program Name: SAN DIEGO COMMUNITY TREATMENT CENTER Record ID: 370048AP
Legal Name: SAN DIEGO COMMUNITY TREATMENT CENTER Service Type: RES-DETOX

Address: 502 TENTH AVENUE Resident Capacity: 46
City, State: SAN DIEGO, CA 92101 Total Occupancy: 46

Phone #: (619)239-7181

Program Name: SAN DIEGO FREEDOM RANCH
Legal Name: SAN DIEGO FREEDOM RANCH, INC.
Address: 1777 BUCKMAN SPRINGS ROAD
City, State: CAMPO, CA 91906
Record ID: 370004AN
Service Type: RES
Resident Capacity: 50

Phone #: (619)478-5696

Program Name: SAN DIEGO RESCUE MISSION MEN'S CENTER RECOVERY PROGRAM Record ID: 370080CN

Legal Name:SAN DIEGO RESCUE MISSION, INC.Service Type:RESAddress:120 ELM STREET, 2ND, 3RD, AND 4TH FLOORSResident Capacity:196City, State:SAN DIEGO, CA 92101-Total Occupancy:196

Phone #: (619)819-1839

Program Name: LIFESPAN PROGRAM OF SAN DIEGO Record ID: 370052BP

Legal Name:SAN DIEGO SPANService Type:RESAddress:4695 LISANN STREETResident Capacity:6City, State:SAN DIEGO, CA 92117-Total Occupancy:6

Phone #: (858)581-1120

Program Name: EAST COUNTY TEEN RECOVERY CENTER Record ID: 370090BN Legal Name: SAN DIEGO YOUTH & COMMUNITY SERVICES, INC. Service Type: NON Address: 7733 PALM STREET, SUITES 101 AND 103 Resident Capacity: 0

City, State: LEMON GROVE, CA 91945- Total Occupancy: 0

Phone #: (619)667-3333

As of: 04/06/2005 **San Diego County**

Program Name: EAST COUNTY COMMUNITIES CENTER - CAT ADS PROGRAM
Legal Name: SAN DIEGO YOUTH AND COMMUNITY SERVICES, INC.
Address: 900 NORTH CUYAMACA STREET, SUITE 108
Resident Capacity: 0

Total Occupancy: 0

Total Occupancy: 0

City, State: EL CAJON, CA 92020-

Phone #: (619)258-6877

Program Name: SCRIPPS MCDONALD CENTER Record ID: 370057AN

Legal Name: SCRIPPS HEALTH

Address: 9898 GENESEE AVENUE, 2ND AND 3RD FLOOR ONLY
City, State: LA JOLLA, CA 92037

Total Occupancy: 50

Phone #: (858)626-7182

Program Name: SCRIPPS MCDONALD CENTER Record ID: 370057BN

Legal Name: SCRIPPS MEMORIAL HOSPITAL - LA JOLLA

Address: 9896 GENESEE AVENUE

City, State: LA JOLLA, CA 92037
Total Occupancy: 30

Phone #: (858)626-5371

Program Name: THE SOUTH BAY TEEN RECOVERY CENTER Record ID: 370081AN Legal Name: SOUTH BAY COMMUNITY SERVICES Service Type: NON

Address: 835 THIRD AVENUE, SUITE D

City, State: CHULA VISTA, CA 91910
Resident Capacity: 0

Total Occupancy: 0

Phone #: (619)691-7732

Program Name:SAINT CLARE'S HOMERecord ID:370067ANLegal Name:ST. CLARE'S HOME, INC.Service Type:NONAddress:2091 EAST VALLEY PARKWAYResident Capacity:0

Phone #: (760)741-0122

City, State: ESCONDIDO, CA 92025-

Program Name: SUBSTANCE ABUSE EVALUATION RESOURCE CENTER Record ID: 370085AP Legal Name: SUBSTANCE ABUSE EVALUATION RESOURCE CENTER CORPORATIC Service Type: NON Address: 3505 CAMINO DEL RIO SOUTH, SUITE 208 Resident Capacity: 0

City, State: SAN DIEGO, CA 92108
Total Occupancy: 0

Phone #: (619)280-3059

Program Name: CHOICES IN RECOVERY/FOUNDATION HOUSE Record ID: 370039IN

Legal Name: THE BETHESDA RECOVERY CENTER Service Type: RES-DETOX

Address: 619 ESCONDIDO AVENUE Resident Capacity: 6
City, State: VISTA, CA 92083 Total Occupancy: 8

Phone #: (760)945-5290

Program Name: CHOICES IN RECOVERY - ALCOHOL AND DRUG ABUSE OUTPATIENT Record ID: 370039JN

Legal Name:THE BETHESDA RECOVERY CENTERService Type:NONAddress:733 SOUTH SANTA FEResident Capacity:0City, State:VISTA, CA 92083Total Occupancy:0

Phone #: (760)945-5290

As of: 04/06/2005 San Diego County

Program Name: CHOICES IN RECOVERY/NEW HOUSE Record ID: 370039KN Legal Name: THE BETHESDA RECOVERY CENTER Service Type: RES

Address: 770 OCEANVIEW DRIVE Resident Capacity: 6
City, State: VISTA, CA 92083 Total Occupancy: 8

Phone #: (760)945-5290

Program Name: CHOICES IN RECOVERY/HILL HOUSE Record ID: 370039LN Legal Name: THE BETHESDA RECOVERY CENTER Service Type: RES

Address: 653 PLUMOSA Resident Capacity: 6
City, State: VISTA, CA 92084 Total Occupancy: 8

City, State: VISTA, CA 92084 Phone #: (760)945-5290

Program Name:CHOICES IN RECOVERY/HUMBLE HOUSERecord ID:370039MNLegal Name:THE BETHESDA RECOVERY CENTERService Type:RESAddress:1007 MARYLAND AVENUEResident Capacity:6

Total Occupancy: 8

City, State: VISTA, CA 92083 Phone #: (760)945-5290

Program Name: CROSSROADS FOUNDATION Record ID: 370002AN Legal Name: THE CROSSROADS FOUNDATION Service Type: RES
Address: 3594 FOURTH AVENUE Resident Capacity: 20
City, State: SAN DIEGO, CA 92103 Total Occupancy: 22

Phone #: (619)296-1151

Program Name:THE FELLOWSHIP CENTERRecord ID:370009ANLegal Name:THE FELLOWSHIP CENTER, INC.Service Type:RESAddress:SEE COMMENT SECTION BELOWResident Capacity:117City, State:ESCONDIDO, CA 92025Total Occupancy:117

Phone #: (760)745-8478

Program Name: STEPPING STONE OF SAN DIEGO, INC.--NONRESIDENTIAL Record ID: 370008BN

Legal Name:THE STEPPING STONE OF SAN DIEGOService Type:NONAddress:3425 5TH AVENUEResident Capacity:0City, State:SAN DIEGO, CA 92103Total Occupancy:0

Phone #: (619)584-4010

Program Name: STEPPING STONE OF SAN DIEGO, INC.
Legal Name: THE STEPPING STONE OF SAN DIEGO
Address: 3767 CENTRAL AVENUE
City, State: SAN DIEGO, CA 92105Record ID: 370008DN
Service Type: RES
Resident Capacity: 28
Total Occupancy: 28

Phone #: (619)584-4010

Program Name: TURNING POINT Record ID: 370013AN

Legal Name:THE TURNING POINT HOME OF SAN DIEGOService Type:RESAddress:1315 25TH STREETResident Capacity:20City, State:SAN DIEGO, CA 92102Total Occupancy:21

Phone #: (619)233-0067

As of: 04/06/2005 San Diego County

Program Name: HEARTLAND HOUSE Record ID: 370003AN Legal Name: THE TWELFTH STEP HOUSE OF SAN DIEGO Service Type: RES

Address: 5855 AND 5860 STREAMVIEW DRIVE Resident Capacity: 26

City, State: SAN DIEGO, CA 92105 Total Occupancy: 26

Phone #: (619)287-5460

Program Name: THE WAY BACK
Legal Name: THE WAY BACK
Address: 2516 A STREET
City, State: SAN DIEGO, CA 92102

Record ID: 370011AN
Service Type: RES
Resident Capacity: 29
Total Occupancy: 29

Phone #: (619)235-0592

Program Name: TRADITION ONE MEN'S & WOMEN'S FACILITY
Legal Name: TRADITION ONE
Address: 4104, 4114 AND 4124 DELTA STREET
City, State: SAN DIEGO, CA 92113
Record ID: 370012AN
Service Type: RES
Resident Capacity: 46
Total Occupancy: 49

Phone #: (619)264-0141

Program Name: UPAC ASIAN/PACIFIC ISLANDER, ADULT ALCOHOL AND DRUG TREAT Record ID: 370071AN Legal Name: UNION OF PAN ASIAN COMMUNITIES Service Type: NON Address: 3288 EL CAJON BOULEVARD, SUITE 13 Resident Capacity: 0 City, State: SAN DIEGO, CA 92104- Total Occupancy: 0

Phone #: (619)521-5720

Program Name: UCSD INTEGRATED DUAL-DIAGNOSIS TREATMENT AND RECOVERY Record ID: 370077AN Legal Name: UNIVERSITY OF CALIFORNIA, SAN DIEGO Service Type: NON Address: 140 ARBOR DRIVE Resident Capacity: 0
City, State: SAN DIEGO, CA 92103- Total Occupancy: 0

Phone #: (619)299-3510

Program Name: BIA/VIETNAM VETERANS OF SAN DIEGO REHABILITATION CENTER Record ID: 370010BN Legal Name: VIETNAM VETERANS OF SAN DIEGO Service Type: RES

Address: 4141 PACIFIC HIGHWAY Resident Capacity: 87

City, State: SAN DIEGO, CA 92110 Total Occupancy: 87

Phone #: (619)497-0142

Program Name: VIETNAM VETERANS OF SAN DIEGO
Legal Name: VIETNAM VETERANS OF SAN DIEGO
Address: 4141 PACIFIC HIGHWAY
City, State: SAN DIEGO, CA 92110
Record ID: 370010DN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (619)497-0142

Program Name: VIETNAM VETERANS OF SAN DIEGO NEW RESOLVE PROGRAM
Legal Name: VIETNAM VETERANS OF SAN DIEGO
Address: 1207 SOUTH ESCONDIDO BOULEVARD
City, State: ESCONDIDO, CA 92025Record ID: 370010CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (760)745-7829

As of: 04/06/2005 San Diego County

Program Name: DKA PARENTCARE FAMILY RECOVERY CENTER
Legal Name: VISTA HILL FOUNDATION
Address: 4990 WILLIAMS AVENUE
City, State: LA MESA, CA 91941Record ID: 370072AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (619)698-1663

Program Name: HAWLEY CENTER FOR SUPPORTIVE LIVING Record ID: 370007CN Legal Name: VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORA Service Type: RES

Address: 9980 AND 10002 HAWLEY ROAD Resident Capacity: 29

City, State: EL CAJON, CA 92021- Total Occupancy: 29

Phone #: (619)561-9808

Program Name: SOBRIETY HOUSE Record ID: 370007AN
Legal Name: VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORA Service Type: RES-DETOX

Address: 1111 ISLAND AVENUE Resident Capacity: 100
City, State: SAN DIEGO, CA 92101 Total Occupancy: 100

Phone #: (619)232-5171

Program Name: AMIGOS SOBRIOS Record ID: 370007BN

Legal Name: VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORA Service Type: RES
Address: 741 ELEVENTH AVENUE Resident Capacity: 18
City, State: SAN DIEGO, CA 92101 Total Occupancy: 18

Phone #: (619)238-9580

As of: 04/06/2005 San Francisco County

Program Name: ARA FIRST STEP HOME Record ID: 380003AN Legal Name: ALCOHOLICS REHABILITATION ASSOCIATION OF SAN FRANCISCO, Service Type: RES
Address: 1035 HAIGHT STREET Resident Capacity: 46
City, State: SAN FRANCISCO, CA 94117 Total Occupancy: 46

Phone #: (415)863-3661

Program Name: S.F. BAY COUNSELING AND EDUCATION Record ID: 380066AP Legal Name: ARA ART AZIZIAN AND PATRISIA BEDROUSSIAN Service Type: NON Address: 1700 IRVING STREET Resident Capacity: 0

City, State: SAN FRANCISCO, CA 94122- Total Occupancy: 0

Phone #: (415)759-9500

Program Name: PROJECT ADAPT Record ID: 380020BN Legal Name: ASIAN AMERICAN RECOVERY SERVICES, INC. Service Type: NON
Address: 2020 HAYES STREET Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94117 Total Occupancy: 0

Phone #: (415)750-5125

Program Name: ASIAN AMERICAN RESIDENTIAL RECOVERY SERVICES Record ID: 380020AN Legal Name: ASIAN AMERICAN RECOVERY SERVICES, INC. Service Type: RES Address: 2024 HAYES STREET Resident Capacity: 22 City, State: SAN FRANCISCO, CA 94117 Total Occupancy: 22

Phone #: (415)750-5111

Program Name: FREMONT PLACE Record ID: 380001JN Legal Name: BAKER PLACES, INC. Service Type: RES-DETOX

Address: 399 FREMONT STREET Resident Capacity: 16 City, State: SAN FRANCISCO, CA 94105-2317 Total Occupancy: 16

Phone #: (415)371-1175

Program Name:HEALY PLACERecord ID:380001INLegal Name:BAKER PLACES, INC.Service Type:RESAddress:120 PAGE STREET, 3RD FLOORResident Capacity:20City, State:SAN FRANCISCO, CA 94102-Total Occupancy:20

Phone #: (415)553-4490

Program Name: ROBERTSON PLACE
Legal Name: BAKER PLACES, INC.
Address: 921 LINCOLN WAY
City, State: SAN FRANCISCO, CA 94122
Record ID: 380001GN
Service Type: DSS
Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)664-4876

Program Name: BAKER STREET HOUSE Record ID: 380001FN
Legal Name: BAKER PLACES, INC. Service Type: DSS

Address: 730 BAKER STREET Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94115 Total Occupancy: 0

Phone #: (415)567-1498

As of: 04/06/2005 San Francisco County

Program Name: GROVE STREET HOUSE Record ID: 380001EN Legal Name: BAKER PLACES, INC. Service Type: DSS

Address: 2157 GROVE STREET Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94117 Total Occupancy: 0

Phone #: (415)387-2275

Program Name: PAGE STREET DETOX Record ID: 380001DN
Legal Name: BAKER PLACES, INC. Service Type: RES-DETOX

Address: 120 PAGE STREET, 2ND FLOOR Resident Capacity: 15 City, State: SAN FRANCISCO, CA 94102- Total Occupancy: 15

Phone #: (415)664-1868

Program Name: FERGUSON PLACE Record ID: 380001CN
Legal Name: BAKER PLACES, INC. Service Type: RES-DETOX

Address: 1249 SCOTT STREET Resident Capacity: 12 City, State: SAN FRANCISCO, CA 94115 Total Occupancy: 12

Phone #: (415)922-9104

Program Name: ACCEPTANCE PLACE
Legal Name: BAKER PLACES, INC.
Address: 1326 4TH AVENUE
City, State: SAN FRANCISCO, CA 94122Record ID: 380001BN
Service Type: RES
Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)682-2080

Program Name: CENTER FOR PROBLEM DRINKERS AND OTHER DRUGS Record ID: 380015AN Legal Name: BAY VIEW-HUNTER'S POINT FOUNDATION FOR COMMUNITY IMPRO Service Type: NON Address: 1625 CARROLL STREET Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94124 Total Occupancy: 0

Phone #: (415)822-6727

Program Name: SUPPORTIVE LIVING PROGRAM
Legal Name: CENTER ON JUVENILE AND CRIMINAL JUSTICE
Address: 1163 GOETTINGEN STREET
City, State: SAN FRANCISCO, CA 94134-2117
Record ID: 380035CN
Service Type: RES
Resident Capacity: 10

Phone #: (415)508-1709

Program Name: SUPPORTIVE LIVING PROGRAM (SLP)

Legal Name: CENTER ON JUVENILE AND CRIMINAL JUSTICE

Address: 1671 25TH AVENUE

City, State: SAN FRANCISCO, CA 94122

Record ID: 380035BN

Service Type: RES

Resident Capacity: 6

Total Occupancy: 6

Phone #: (415)661-5777

Program Name: GOLDEN GATE FOR SENIORS Record ID: 380005AN Legal Name: COMMUNITY AWARENESS & TREATMENT SERVICES, INC. Service Type: RES
Address: 637 SOUTH VAN NESS AVENUE Resident Capacity: 20
City, State: SAN FRANCISCO, CA 94110 Total Occupancy: 20

Phone #: (415)626-7553

As of: 04/06/2005 San Francisco County

Program Name: FREEDOM FROM ALCOHOL AND DRUGS Record ID: 380034AN Legal Name: FREEDOM FROM ALCOHOL AND DRUGS, INC. Service Type: RES

Address: 1351 AND 1353 48TH AVENUE Resident Capacity: 12

City, State: SAN FRANCISCO, CA 94122 Total Occupancy: 12

Phone #: (415)665-8077

Program Name: FREEDOM FROM ALCOHOL AND DRUGS Record ID: 380034DN Legal Name: FREEDOM FROM ALCOHOL AND DRUGS, INC. Service Type: RES

Address: 1362 AND 1366 48TH AVENUE Resident Capacity: 12

City, State: SAN FRANCISCO, CA 94122 Total Occupancy: 12

Phone #: (415)665-8077

Program Name: FREEDOM FROM ALCOHOL AND DRUGS Record ID: 380034CN
Legal Name: FREEDOM FROM ALCOHOL AND DRUGS, INC.

Address: 1569, 1569-A, AND 1569-B 48TH AVENUE Resident Capacity: 16
City, State: SAN FRANCISCO, CA 94122 Total Occupancy: 17

Phone #: (415)665-8077

Program Name: GLIDE EXTENDED FAMILY RECOVERY PROGRAM
Legal Name: GLIDE MEMORIAL UNITED METHODIST CHURCH
Address: 330 ELLIS STREET
City, State: SAN FRANCISCO, CA 94102
Record ID: 380036AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)674-6020

Program Name: HAIGHT ASHBURY ALCOHOL TREATMENT SERVICES
Legal Name: HAIGHT ASHBURY FREE CLINICS, INC.
Address: 425 DIVISADERO STREET, SUITE 201
City, State: SAN FRANCISCO, CA 94117
Record ID: 380016AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)487-5634

Program Name: HAIGHT ASHBURY BASN PROGRAM
Legal Name: HAIGHT ASHBURY FREE CLINICS, INC.
Address: 940 HAIGHT STREET
City, State: SAN FRANCISCO, CA 94102
Record ID: 380016DN
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24

Phone #: (415)487-5626

Program Name: SMITH RYAN HOUSE Record ID: 380016HN
Legal Name: HAIGHT ASHBURY FREE CLINICS, INC. Service Type: RES-DETOX

Address: 764 AND 766 STANYAN STREET Resident Capacity: 10 City, State: SAN FRANCISCO, CA 94130- Total Occupancy: 10

Phone #: (415)394-5867

Program Name: LODESTAR

Legal Name: HAIGHT ASHBURY FREE CLINICS, INC.

Address: 1441-A THROUGH 1441-F CHINOOK COURT, TREASURE ISLAND

City, State: SAN FRANCISCO, CA 94130
Record ID: 380016IN

Service Type: RES

Resident Capacity: 36

Total Occupancy: 36

Phone #: (415)394-9079

As of: 04/06/2005 San Francisco County

Program Name: CENTER FOR RECOVERY
Legal Name: HAIGHT ASHBURY FREE CLINICS, INC.
Address: 1443-A THROUGH 1443-F CHINOOK COURT TREASURE ISLAND
City, State: SAN FRANCISCO, CA 94130Record ID: 380016JN
Service Type: RES
Total Occupancy: 36

Phone #: (415)394-5247

Program Name: WESTERN ADDITION RECOVERY HOUSE Record ID: 380016BN Legal Name: HAIGHT ASHBURY FREE CLINICS, INC. Service Type: RES

Address: 1440-A THROUGH 1440-F CHINOOK COURT Resident Capacity: 36

City, State: SAN FRANCISCO, CA 94117 Total Occupancy: 36

Phone #: (415)487-5647

Program Name: HARM REDUCTION THERAPY CENTER
Legal Name: HARM REDUCTION THERAPY CENTER
Address: 423 GOUGH STREET
City, State: SAN FRANCISCO, CA 94102Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)863-4282

Program Name: HENRY OHLHOFF HOUSE Record ID: 380013AN Legal Name: HENRY OHLHOFF HOUSE Service Type: RES

Address: 601 STEINER STREET AND 625 STEINER STREET Resident Capacity: 52

City, State: SAN FRANCISCO, CA 94117 Total Occupancy: 52

Phone #: (415)621-4388

Program Name: OHLHOFF WOMEN'S RESIDENTIAL PROGRAM
Legal Name: HENRY OHLHOFF HOUSE
Address: 634 LOS PALMOS DRIVE
City, State: SAN FRANCISCO, CA 94127-2212
Record ID: 380013DN
Service Type: RES
Resident Capacity: 9
Total Occupancy: 9

Phone #: (415)841-1775

Program Name: HENRY OHLHOFF OUTPATIENT PROGRAMS
Legal Name: HENRY OHLHOFF HOUSE
Address: 2418 CLEMENT STREET
City, State: SAN FRANCISCO, CA 94121
Record ID: 380013BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)221-3354

Program Name: OHLHOFF OUTPATIENT PROGRAMS Record ID: 380079AN Legal Name: HENRY OHLHOFF OUTPATIENT PROGRAMS Service Type: NON
Address: 2423 CLEMENT STREET Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94121- Total Occupancy: 0

Phone #: (415)221-3354

Program Name: TREATMENT PROGRAMS Record ID: 380059AN Legal Name: HORIZONS UNLIMITED OF SAN FRANCISCO, INC. Service Type: NON Address: 440 POTRERO AVENUE Resident Capacity: 0

City, State: SAN FRANCISCO, CA 94110- Total Occupancy: 0

Phone #: (415)487-6700

As of: 04/06/2005 San Francisco County

Program Name: THE IRIS PROJECT Record ID: 380021AN Legal Name: IRIS CENTER: WOMEN'S COUNSELING AND RECOVERY SERVICES Service Type: NON Address: 333 VALENCIA STREET, SUITE 222 Resident Capacity: 0 City, State: SAN FRANCISCO, CA 94103 Total Occupancy: 0

Phone #: (415)864-2364

Program Name: RITES OF PASSAGE Record ID: 380045DN Legal Name: JELANI, INC. Service Type: RES

Address: 1638 AND 1640 KIRKWOOD STREET Resident Capacity: 12

City, State: SAN FRANCISCO, CA 94124- Total Occupancy: 24

Phone #: (415)671-1165

Program Name: JELANI HOUSE OUTPATIENT SERVICES Record ID: 380045BN Legal Name: JELANI, INC. Service Type: NON
Address: 1588 QUESADA AVENUE Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94124 Total Occupancy: 0

Phone #: (415)822-5977

Program Name: JELANI HOUSE Record ID: 380045AN Legal Name: JELANI, INC. Service Type: RES
Address: 1601 QUESADA AVENUE Resident Capacity: 16
City, State: SAN FRANCISCO, CA 94124 Total Occupancy: 42

Phone #: (415)822-5977

Program Name: JELANI, INC. MISSION RECOVERY HOUSE Record ID: 380045EN Legal Name: JELANI, INC. Service Type: RES

Address: 2261 AND 2263 BRYANT STREET Resident Capacity: 16

City, State: SAN FRANCISCO, CA 94110- Total Occupancy: 35

Phone #: (415)206-1560

Program Name:FROM START TO FINISHRecord ID:380045CNLegal Name:JELANI, INC.Service Type:RESAddress:1499 QUESADA AVENUEResident Capacity:8City, State:SAN FRANCISCO, CA 94124-Total Occupancy:8

Phone #: (415)671-1045

Program Name: CASA QUETZAL Record ID: 380055AN

Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: RES
Address: 635 BRUNSWICK STREET Resident Capacity: 6
City, State: SAN FRANCISCO, CA 94112- Total Occupancy: 6

Phone #: (415)337-4065

Program Name: AVIVA HOUSE Record ID: 380055BN

Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: RES Address: 1724-1726 BRYANT STREET Resident Capacity: 0 City, State: SAN FRANCISCO, CA 94100- Total Occupancy: 0

Phone #: (650)244-1444

As of: 04/06/2005 San Francisco County

Program Name: YOUTH OUTREACH RECOVERY AND EDUCATION SERVICES (Y.O.R.I Legal Name: MORRISANIA WEST, INC.

Record ID: 380053BN Service Type: NON

Address: 205 13TH STREET, SUITE 3300 Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94103- Total Occupancy: 0

Phone #: (415)552-4660

Program Name: EPIPHANY RESIDENTIAL PROGRAM
Legal Name: MOUNT SAINT JOSEPH - SAINT ELIZABETH
Address: 100 MASONIC AVENUE, 2ND FLOOR
City, State: SAN FRANCISCO, CA 94118Record ID: 380081CN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 14

Phone #: (415)750-1033

Program Name: EPIPHANY HOUSE Record ID: 380081BN Legal Name: MOUNT SAINT JOSEPH - SAINT ELIZABETH Service Type: RES

Address: 1615 BRODERICK Resident Capacity: 14

City, State: SAN FRANCISCO, CA 94115- Total Occupancy: 22

Phone #: (415)409-6003

Program Name: EPIPHANY CENTER FOR FAMILIES IN RECOVERY INTENSIVE OUTPA
Legal Name: MOUNT ST. JOSEPH - ST. ELIZABETH
Address: 100 MASONIC AVENUE, 1ST FLOOR
City, State: SAN FRANCISCO, CA 94118Record ID: 380081AN
Service Type: NON
Resident Capacity: 0

Phone #: (415)351-4052

Program Name: NEW LEAF: SERVICES FOR OUR COMMUNITY
Legal Name: NEW LEAF: SERVICES FOR OUR COMMUNITY
Address: 103 HAYES STREET
City, State: SAN FRANCISCO, CA 94102Record ID: 380054AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)626-7000

Program Name: NEW LEAF: SERVICES FOR OUR COMMUNITY Record ID: 380054BN Legal Name: NEW LEAF: SERVICES FOR OUR COMMUNITY Service Type: NON Address: 30 PEARL STREET Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94103- Total Occupancy: 0

Phone #: (415)626-7000

Program Name: NORTHERN CALIFORNIA SERVICE LEAGUE Record ID: 380049AN Legal Name: NORTHERN CALIFORNIA SERVICE LEAGUE Service Type: NON Address: 28 BOARDMAN PLACE Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94103 Total Occupancy: 0

Phone #: (415)863-2323

Program Name: POSITIVE DIRECTIONS EQUALS CHANGE, INC. OUTPATIENT TREATN Record ID: 380051BN Legal Name: POSITIVE DIRECTIONS EQUALS CHANGE, INC. Service Type: NON Address: 4720 3RD STREET Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94124- Total Occupancy: 0

Phone #: (415)401-0199

San Francisco County

Total Occupancy: 0

As of: 04/06/2005

City, State: SAN FRANCISCO, CA 94124-

Program Name: POSITIVE DIRECTIONS EQUALS CHANGE OUTPATIENT PROGRAM Record ID: 380051AN Legal Name: POSITIVE DIRECTIONS EQUALS CHANGE, INC. Service Type: NON Address: 2111 JENNINGS STREET Resident Capacity: 0

Phone #: (415)822-7144

Program Name: ZAP PROGRAM
Legal Name: POTRERO HILL NEIGHBORHOOD HOUSE
Address: 953 DE HARO STREET
City, State: SAN FRANCISCO, CA 94107Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)826-8080

Program Name: SAGE'S TRAUMA AND RECOVERY CENTER
Legal Name: SAGE PROJECT, INC.
Address: 1277 MISSION STREET
City, State: SAN FRANCISCO, CA 94103Record ID: 380063AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)905-5050

Program Name: THE STONEWALL PROJECT Record ID: 380061BN Legal Name: SAN FRANCISCO GENERAL HOSPITAL Service Type: NON
Address: 3180 18TH STREET, SUITE 202 Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94110- Total Occupancy: 0

Phone #: (415)502-1999

Program Name: STIMULANT TREATMENT OUTPATIENT PROGRAM
Legal Name: SAN FRANCISCO GENERAL HOSPITAL
Address: 3180 18TH STREET, SUITES 202 AND 205
City, State: SAN FRANCISCO, CA 94110Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)502-5777

Program Name: STEPPING STONE Record ID: 380032AN Legal Name: SAN FRANCISCO WOMEN'S REHABILITATION FOUNDATION, INCORI Service Type: RES Address: 255 TENTH AVENUE Resident Capacity: 12 City, State: SAN FRANCISCO, CA 94118 Total Occupancy: 12

Phone #: (415)751-5921

Program Name: NEW LIFE CENTER Record ID: 380088BN Legal Name: SOCIAL BETTERMENT DEVELOPMENT COMPANY Service Type: RES

Address: 219-221 SEVENTH STREET Resident Capacity: 6

City, State: SAN FRANCISCO, CA 94103- Total Occupancy: 7

Phone #: (415)255-7434

Program Name:FR. ALFRED CENTERRecord ID:380017CNLegal Name:ST. ANTHONY FOUNDATIONService Type:RESAddress:291 10TH STREETResident Capacity:100City, State:SAN FRANCISCO, CA 94103-Total Occupancy:100

Phone #: (415)241-2600

As of: 04/06/2005 San Francisco County

Program Name: FRIENDSHIP HOUSE - AFTERCARE
Legal Name: THE FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS
Address: 56 JULIAN AVENUE, 1ST FLOOR
City, State: SAN FRANCISCO, CA 94103
Record ID: 380004BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (415)865-0964

Program Name: FRIENDSHIP HOUSE
Legal Name: THE FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS
Address: 56 JULIAN AVENUE, 2ND AND 3RD FLOORS
City, State: SAN FRANCISCO, CA 94103
Record ID: 380004AN
Service Type: RES
Resident Capacity: 30
Total Occupancy: 30

Phone #: (415)865-0964

Program Name: GOOD SHEPHERD GRACENTER Record ID: 380040AN Legal Name: THE GOOD SHEPHERD GRACENTER OF SAN FRANCISCO Service Type: RES

Address: 250 AMHERST STREET Resident Capacity: 13

City, State: SAN FRANCISCO, CA 94134 Total Occupancy: 13

Phone #: (415)337-1938

Program Name: THE METROPOLITAN FRESH START HOUSE Record ID: 380084AN Legal Name: THE METROPOLITAN FRESH START HOUSE Service Type: RES

Address: 316 LELAND AVENUE Resident Capacity: 15

City, State: SAN FRANCISCO, CA 94134- Total Occupancy: 15

Phone #: (415)585-8808

Program Name: LATINO FAMILY ALCOHOLISM COUNSELING CENTER Record ID: 380008AN Legal Name: THE MISSION COUNCIL ON ALCOHOL ABUSE FOR THE SPANISH SPE Service Type: NON Address: 820 VALENCIA STREET Resident Capacity: 0
City, State: SAN FRANCISCO, CA 94110 Total Occupancy: 0

Phone #: (415)826-6767

Program Name: FAMILY DAY TREATMENT PROGRAM AND AFTERCARE PROGRAM Record ID: 380008BN Legal Name: THE MISSION COUNCIL ON ALCOHOL ABUSE FOR THE SPANISH SPE Service Type: NON Address: 474 VALENCIA STREET, SUITES 115, 135, AND 235 Resident Capacity: 0 City, State: SAN FRANCISCO, CA 94103- Total Occupancy: 0

Phone #: (415)864-0554

Program Name: HARBOR LIGHT ALCOHOL SERVICES CENTER Record ID: 380006AN
Legal Name: THE SALVATION ARMY Service Type: RES-DETOX

Address: 1275 HARRISON STREET Resident Capacity: 100 City, State: SAN FRANCISCO, CA 94103 Total Occupancy: 100

Phone #: (415)503-3000

Program Name: THE SALVATION ARMY - HARBOR HOUSE Record ID: 380006EN
Legal Name: THE SALVATION ARMY Service Type: RES
Address: 407 NINTH STREET Resident Capacity: 30
City, State: SAN FRANCISCO, CA 94103- Total Occupancy: 82

Phone #: (415)503-3029

San Francisco County As of: 04/06/2005

Program Name: HOWARD STREET DETOX Record ID: 380010BN Legal Name: THE SAN FRANCISCO PARTICULAR COUNCIL OF THE SOCIETY OF S' Service Type: RES-DETOX

Resident Capacity: 38 Address: 1175 HOWARD STREET, SECOND FLOOR Total Occupancy: 38 City, State: SAN FRANCISCO, CA 94103

Phone #: (415)864-3057

Program Name: UP FROM DARKNESS Record ID: 380085AN

Legal Name: UP FROM DARKNESS TRANSITIONAL HOUSING AND EDUCATIONAL Service Type: NON Resident Capacity: 0 Address: 1410 TURK STREET Total Occupancy: 0

Phone #: (415)447-4234

City, State: SAN FRANCISCO, CA 94115-

Program Name: NATIVE AMERICAN HEALTH CENTER Record ID: 380087AN Legal Name: URBAN INDIAN HEALTH BOARD, INC. Service Type: NON Resident Capacity: 0 Address: 160 CAPP STREET, 2ND FLOOR City, State: SAN FRANCISCO, CA 94110-Total Occupancy: 0

Phone #: (415)621-4371

Program Name: WALDEN HOUSE FEMALE OFFENDER TREATMENT AND EMPLOYME Record ID: 380019IN

Service Type: RES Legal Name: WALDEN HOUSE, INC. Address: 1254 13TH STREET, UNITS A-F Resident Capacity: 36 Total Occupancy: 36 City, State: SAN FRANCISCO, CA 94130-

Phone #: (415)355-2508

Record ID: 380019GN Program Name: WALDEN HOUSE ADULT RESIDENTIAL PROGRAM

Service Type: RES Legal Name: WALDEN HOUSE, INC. Address: 1445 CHINOOK COURT, UNITS A, B, C, D, E, AND F Resident Capacity: 26 Total Occupancy: 26 City, State: SAN FRANCISCO, CA 94130-

Phone #: (415)989-4902

Record ID: 380019AN Program Name: WALDEN HOUSE Service Type: RES Legal Name: WALDEN HOUSE, INC.

Address: 890 HAYES STREET Resident Capacity: 115 Total Occupancy: 115 City, State: SAN FRANCISCO, CA 94117

Phone #: (415)554-1100

Record ID: 380019CN Program Name: WALDEN HOUSE - OUTPATIENT SERVICES Legal Name: WALDEN HOUSE, INC. Service Type: NON Address: 1885 MISSION STREET Resident Capacity: 0

Total Occupancy: 0 City, State: SAN FRANCISCO, CA 94103

Phone #: (415)554-1130

Record ID: 380019DN Program Name: WALDEN HOUSE ADOLESCENT FACILITY

Service Type: DSS Legal Name: WALDEN HOUSE, INC. Address: 214 HAIGHT STREET Resident Capacity: 0 City, State: SAN FRANCISCO, CA 94102 Total Occupancy: 0

Phone #: (415)554-1480

As of: 04/06/2005 San Francisco County

Program Name: WALDEN HOUSE ADULT RESIDENTIAL PROGRAM
Legal Name: WALDEN HOUSE, INC.
Address: 815 BUENA VISTA WEST
City, State: SAN FRANCISCO, CA 94117

Record ID: 380019BN
Service Type: RES
Resident Capacity: 108
Total Occupancy: 108

Phone #: (415)554-1450

Program Name: WALDEN HOUSE FEMALE OFFENDER TREATMENT AND EMPLOYME Record ID: 380019FN Legal Name: WALDEN HOUSE, INC. Service Type: RES

Address: 1442 CHINOOK COURT, UNITS A, B, C, AND D Resident Capacity: 15

City, State: SAN FRANCISCO, CA 94130- Total Occupancy: 15

Phone #: (415)989-4902

Program Name: WALDEN HOUSE FEMALE OFFENDER TREATMENT AND EMPLOYME Record ID: 380019HN Legal Name: WALDEN HOUSE, INC. Service Type: RES

Address: 1447 CHINOOK COURT, UNITS A, B, C, AND D Resident Capacity: 16

City, State: SAN FRANCISCO, CA 94130- Total Occupancy: 16

Phone #: (415)989-4902

Program Name:WESTSIDE INNER CITY OUTPATIENT SERVICESRecord ID:380058ANLegal Name:WESTSIDE COMMUNITY MENTAL HEALTH CENTERService Type:NONAddress:489 CLEMENTINA STREETResident Capacity:0City, State:SAN FRANCISCO, CA 94103-Total Occupancy:0

Phone #: (415)495-6071

As of: 04/06/2005 San Joaquin County

Program Name: ACCLIMATION INCORPORATED Record ID: 390013AN Legal Name: ACCLIMATION INCORPORATED Service Type: NON Address: 920 NORTH HUNTER STREET Resident Capacity: 0 Total Occupancy: 0

Phone #: (209)942-3682

Program Name: NEW DIRECTIONS Record ID: 390007CN

Legal Name: ALCOHOL AND DRUG AWARENESS PROGRAM

Address: 1981 CHEROKEE ROAD

City, State: STOCKTON, CA 95205
Total Occupancy: 0

Phone #: (209)870-6500

Program Name: NEW DIRECTIONS Record ID: 390007BN

Legal Name: ALCOHOL AND DRUG AWARENESS PROGRAM

Service Type: RES-DETOX

Address: 1981 CHEROKEE ROAD Resident Capacity: 72 City, State: STOCKTON, CA 95205- Total Occupancy: 84

Phone #: (209)870-6500

Program Name: HEALTHCARE SERVICES-EL DORADO HOUSE Record ID: 390018AP

Legal Name:HEALTHCARE SERVICES, INC.Service Type:RESAddress:1700 SOUTH EL DORADO STREETResident Capacity:77City, State:STOCKTON, CA 95202-Total Occupancy:97

Phone #: (209)948-0570

Program Name: THREE RIVERS INDIAN LODGE Record ID: 390003AN Legal Name: NATIVE DIRECTIONS, INC. Service Type: RES

Address: 13505 SOUTH UNION ROAD Resident Capacity: 20 City, State: MANTECA, CA 95336 Total Occupancy: 20

Phone #: (209)858-2421

Program Name: NEW BEGINNINGS RECOVERY MINISTRIES INT'L Record ID: 390019AN

Legal Name:NEW BEGINNINGS RECOVERY MINISTRIES INT'LService Type:RESAddress:1505 HOLLY DRIVEResident Capacity:9City, State:TRACY, CA 95376-Total Occupancy:10

Phone #: (209)834-8965

Program Name: PHARMATOX PARTNER - ALPHA HOUSE Record ID: 390011CN

Legal Name:PHARMATOX PARTNERS, INC.Service Type:RESAddress:3029 NORTH FRANKLIN STREETResident Capacity:12City, State:STOCKTON, CA 95204-Total Occupancy:12

Phone #: (707)435-8042

Program Name: NARROW GATE COUNSELING CENTER Record ID: 390011AN

Legal Name:PHARMATOX PARTNERS, INC.Service Type:NONAddress:33 EAST MAGNOLIA STREET, SUITE 16Resident Capacity:0City, State:STOCKTON, CA 95202-Total Occupancy:0

Phone #: (209)465-3171

As of: 04/06/2005 San Joaquin County

Program Name: NEW CHOICES Record ID: 390002GN
Legal Name: SAN JOAQUIN COUNTY OFFICE OF SUBSTANCE ABUSE Service Type: NON
Address: 640 NORTH UNION STREET Resident Capacity: 0
City, State: STOCKTON, CA 95205- Total Occupancy: 0

Phone #: (209)468-9710

Program Name: RESIDENTIAL WOMEN'S DRUG PROGRAM AND DETOX SERVICES
Legal Name: SAN JOAQUIN COUNTY OFFICE OF SUBSTANCE ABUSE
Record ID: 390002DN
Service Type: RES-DETOX

Address: 500 WEST HOSPITAL ROAD Resident Capacity: 48
City, State: FRENCH CAMP, CA 95231 Total Occupancy: 48

Phone #: (209)468-6208

Program Name: STARTING POINT Record ID: 390002FN
Legal Name: SAN JOAQUIN COUNTY OFFICE OF SUBSTANCE ABUSE Service Type: DETOX

Address: 500 WEST HOSPITAL ROAD Resident Capacity: 20 City, State: FRENCH CAMP, CA 95231- Total Occupancy: 20

Phone #: (209)468-6863

Program Name: FAMILY TIES Record ID: 390002EN

Legal Name: SAN JOAQUIN COUNTY OFFICE OF SUBSTANCE ABUSE

Address: 322 NORTH CALIFORNIA STREET

City, State: STOCKTON, CA 95202

Resident Capacity: 28

Total Occupancy: 76

Phone #: (209)468-8937

Program Name: RESIDENTIAL TREATMENT CENTER Record ID: 390002CN

Legal Name: SAN JOAQUIN COUNTY OFFICE OF SUBSTANCE ABUSE

Address: 500 WEST HOSPITAL ROAD, BENTON HALL SECOND FLOOR
City, State: FRENCH CAMP, CA 95231

Service Type: RES
Resident Capacity: 42
Total Occupancy: 42

Phone #: (209)468-6880

Program Name: SAN JOAQUIN COUNTY RECOVERY HOUSE Record ID: 390002AN

Legal Name:SAN JOAQUIN COUNTY OFFICE OF SUBSTANCE ABUSEService Type:RESAddress:500 WEST HOSPITAL ROAD--RECOVERY HOUSEResident Capacity:91City, State:FRENCH CAMP, CA 95231Total Occupancy:91

Phone #: (209)468-6857

Program Name: SERVICE FIRST OUTPATIENT PROGRAM

Legal Name: SERVICE FIRST OF NORTHERN CALIFORNIA

Record ID: 390017AN

Service Type: NON

Address: 7602 MURRAY DRIVE, SUITE 100 Resident Capacity: 0
City, State: STOCKTON, CA 95210- Total Occupancy: 0

Phone #: (209)644-6300

Program Name: SERVICE FIRST OUTPATIENT PROGRAM

Legal Name: SERVICE FIRST OF NORTHERN CALIFORNIA

Service Type: NON

Address: 1112 NORTH EL DORADO STREET, SUITE D Resident Capacity: 0
City, State: STOCKTON, CA 95202- Total Occupancy: 0

Phone #: (209)644-4800

State of California Department of Alcohol and Drug Programs Licensed Residential Facilities and/or Certified Alcohol and Drug Programs As of: 04/06/2005 San Joaquin County

Program Name: ARK RESIDENTIAL TREATMENT CENTER

Legal Name: XENIA CORPORATION
Address: 1609 NORTH WILSON WAY
City, State: STOCKTON, CA 95205-3119

Phone #: (209)466-1516

Record ID: 390009AN Service Type: RES Resident Capacity: 75 Total Occupancy: 75

As of: 04/06/2005

San Luis Obispo County

Program Name: LIFE STEPS ALCOHOL AND DRUG FREE LIVING CENTER

Record ID: 400002AN

Service Types PEG

Legal Name: LIFE STEPS FOUNDATION, INC. Service Type: RES

Address: 1217 MILL STREET Resident Capacity: 6
City, State: SAN LUIS OBISPO, CA 93401 Total Occupancy: 16

Phone #: (805)549-0150

Program Name: PASOS DE VIDA Record ID: 400002BN

Legal Name:LIFE STEPS FOUNDATION, INC.Service Type:RESAddress:1431 POMEROY ROADResident Capacity:12City, State:ARROYO GRANDE, CA 93420Total Occupancy:36

Phone #: (805)481-2505

Program Name: SAN LUIS OBISPO CENTER FOR CHANGE Record ID: 400005AN

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 285 SOUTH STREET, SUITE M
City, State: SAN LUIS OBISPO, CA 93401
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (805)544-2892

Program Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES Record ID: 400003AN

Legal Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES

Address: 2945 MCMILLAN ROAD, SUITE 136

Resident Capacity: 0

City, State: SAN LUIS OBISPO, CA 93401
Resident Capacity: 0

Total Occupancy: 0

Phone #: (805)781-4275

Program Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES Record ID: 400003DN

Legal Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES

Address: 1106 EAST GRAND AVENUE

City, State: ARROYO GRANDE, CA 93420
Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (805)473-7080

Program Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES Record ID: 400003BN

Legal Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES

Service Type: NON

A bloom 2556 FL GAMINO PEAL

Address: 3556 EL CAMINO REAL Resident Capacity: 0
City, State: ATASCADERO, CA 93422- Total Occupancy: 0

Phone #: (805)461-6080

Program Name: SENTENCING CONCEPTS Record ID: 400004AP Legal Name: SENTENCING CONCEPTS, INC. Service Type: NON

Address: 11545 LOS OSOS VALLEY ROAD, SUITE C-3

City, State: SAN LUIS OBISPO, CA 93405
Total Occupancy: 0

Phone #: (805)788-0100

As of: 04/06/2005 San Mateo County

Program Name: OUTPATIENT DRUG AND ALCOHOL SERVICES FOR ASIANS (ODASA Legal Name: ASIAN AMERICAN RECOVERY SERVICES, INC.

Record ID: 410028BN Service Type: NON

Address: 6181 MISSION STREET Resident Capacity: 0
City, State: DALY CITY, CA 94014- Total Occupancy: 0

Phone #: (650)301-3240

Program Name: THE SEQUOIA CENTER Record ID: 410032DP

Legal Name: CHEMICAL DATA SERVICES CORPORATION

Service Type: RES-DETOX

Address: 481 LINCOLN AVENUE

Resident Consoitu: 6

Address: 481 LINCOLN AVENUE Resident Capacity: 6
City, State: REDWOOD CITY, CA 94061Total Occupancy: 6

Phone #: (650)364-6204

Program Name: THE SEQUOIA CENTER Record ID: 410032BP

Legal Name: CHEMICAL DATA SERVICES CORPORATION

Address: 650 MAIN STREET

City, State: REDWOOD CITY, CA 94063
Total Occupancy: 0

Phone #: (650)364-5504

Program Name: REDWOOD CENTER Record ID: 410011AN

Legal Name: COMMUNITY AWARENESS & TREATMENT SERVICES, INC.

Address: 100 EDMONDS ROAD

City, State: REDWOOD CITY, CA 94062

City, State: REDWOOD CITY, CA 94062

Service Type: RES

Resident Capacity: 49

Total Occupancy: 49

Phone #: (650)366-5723

Program Name: DAYTOP ADOLESCENT PROGRAM Record ID: 410012AN

Legal Name:DAYTOP VILLAGE, INC.Service Type:DSSAddress:631 WOODSIDE ROADResident Capacity:0City, State:REDWOOD CITY, CA 94061Total Occupancy:0

Phone #: (650)367-9030

Program Name: DAYTOP EPA Record ID: 410012CN

Legal Name:DAYTOP VILLAGE, INC.Service Type:RESAddress:2560 PULGAS AVENUEResident Capacity:32City, State:EAST PALO ALTO, CA 94303Total Occupancy:32

Phone #: (650)325-6466

Program Name: EL CENTRO DE LIBERTAD/THE FREEDOM CENTER Record ID: 410026DN

Legal Name: EL CENTRO DE LIBERTAD

Address: 210 SAN MATEO ROAD, SUITE 204
City, State: HALF MOON BAY, CA 94019
Total Occupancy: 0

Phone #: (650)560-9995

Program Name:THE FREEDOM CENTERRecord ID:410026CNLegal Name:EL CENTRO DE LIBERTADService Type:NONAddress:1230 HOPKINS, SUITE AResident Capacity:0

Total Occupancy: 0

Phone #: (650)599-9955

City, State: REDWOOD CITY, CA 94062-

As of: 04/06/2005 San Mateo County

Program Name: EL CENTRO DE LIBERTAD "THE FREEDOM CENTER" Record ID: 410026BN Legal Name: EL CENTRO DE LIBERTAD Service Type: NON

Address: 2944 BROADWAY Resident Capacity: 0

Total Occupancy: 0

Phone #: (650)599-9955

City, State: REDWOOD CITY, CA 94062-

Program Name: WILLIAMS HOUSE II Record ID: 410027MN

Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SEI Service Type: RES
Address: 1085 - B WEEKS STREET Resident Capacity: 6
City, State: EAST PALO ALTO, CA 94303- Total Occupancy: 6

Phone #: (650)462-6999

Program Name: MALAIKA HOUSE Record ID: 410027BN

Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SEI Service Type: RES Address: 2041-2043 EUCLID AVENUE Resident Capacity: 7
City, State: EAST PALO ALTO, CA 94303 Total Occupancy: 14

Phone #: (650)462-6983

Program Name: WALKER HOUSE Record ID: 410027AN

Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SEF Service Type: RES
Address: 1095 WEEKS AVENUE Resident Capacity: 6
City, State: EAST PALO ALTO, CA 94303 Total Occupancy: 6

Phone #: (650)462-4603

Program Name: FREE AT LAST Record ID: 410027IN

Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SEF Service Type: NON Address: 1796 BAY ROAD Resident Capacity: 0
City, State: EAST PALO ALTO, CA 94303- Total Occupancy: 0

Phone #: (650)462-6996

Program Name: WILLIAMS HOUSE I Record ID: 410027LN

Legal Name: FREE AT LAST:COMMUNITY RECOVERY AND REHABILITATION SER Service Type: RES
Address: 1085 - A WEEKS STREET Resident Capacity: 6
City, State: EAST PALO ALTO, CA 94303- Total Occupancy: 6

Phone #: (650)462-6999

Program Name: PALM AVENUE SOCIAL MODEL DETOXIFICATION Record ID: 410003AN Legal Name: HORIZON SERVICES, INCORPORATED Service Type: RES-DETOX

Address: 2251 PALM AVENUE Resident Capacity: 15 City, State: SAN MATEO, CA 94403 Total Occupancy: 15

Phone #: (650)513-6500

Program Name: JERICHO PROJECT Record ID: 410041AN Legal Name: JERICHO PROJECT Service Type: RES

Address: 154 & 156 2ND AVENUE Resident Capacity: 12

City, State: DALY CITY, CA 94014- Total Occupancy: 15

Phone #: (650)994-9832

As of: 04/06/2005 San Mateo County

Program Name: LATINO COMMISSION/ENTRE FAMILIA OUTPATIENT Record ID: 410020IN Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: NON

Address: 301 GRAND AVENUE, SUITE 301 Resident Capacity: 0
City, State: SOUTH SAN FRANCISCO, CA 94080- Total Occupancy: 0

Phone #: (650)244-1444

Program Name: CASA MARIA RECOVERY HOME Record ID: 410020AN

Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: RES Address: 105 MCLAIN AVENUE Resident Capacity: 9

City, State: BRISBANE, CA 94005 Total Occupancy: 9

Phone #: (650)244-1444

Program Name: CASA AZTLAN RECOVERY HOME Record ID: 410020DN

Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: RES Address: 3080 LONGVIEW DRIVE Resident Capacity: 9

City, State: SAN BRUNO, CA 94066 Total Occupancy: 9

Phone #: (650)355-7573

Program Name: CASA LOS HERMANOS Record ID: 410020HN

Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: RES

Address: 693 7TH AVENUE Resident Capacity: 6
City, State: SAN BRUNO, CA 94006- Total Occupancy: 6

Phone #: (415)468-9020

Program Name: CASA ADELITA Record ID: 410020FN

Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: RES

Address: 160 TEHAMA COURT Resident Capacity: 6
City, State: SAN BRUNO, CA 94066- Total Occupancy: 6

Phone #: (650)244-1444

Program Name: PROJECT NINETY Record ID: 410005VN

Legal Name:PROJECT NINETYService Type:NONAddress:15 NINTH AVENUEResident Capacity:0City, State:SAN MATEO, CA 94401-Total Occupancy:0

Phone #: (650)579-7881

Program Name: DUNTZ HOUSE Record ID: 410005HN

Legal Name:PROJECT NINETYService Type:RESAddress:23 NORTH GRANT STREETResident Capacity:4City, State:SAN MATEO, CA 94401Total Occupancy:4

Phone #: (650)579-7881

Program Name: ELLIOTT CENTER Record ID: 410005MN

Legal Name:PROJECT NINETYService Type:RESAddress:314 BADEN AVENUEResident Capacity:10City, State:SOUTH SAN FRANCISCO, CA 94080Total Occupancy:10

Phone #: (650)873-7620

As of: 04/06/2005 San Mateo County

Program Name: HOFFMAN HOUSE Record ID: 410005QN Legal Name: PROJECT NINETY Service Type: RES

Address: 713 CYPRESS AVENUE Resident Capacity: 6

City, State: SOUTH SAN FRANCISCO, CA 94080 Total Occupancy: 6

Phone #: (650)579-7881

Program Name: PROJECT NINETY Record ID: 410005TN Legal Name: PROJECT NINETY Service Type: RES

Address: 195 SPRUCE AVENUE Resident Capacity: 5

City, State: SOUTH SAN FRANCISCO, CA 94080- Total Occupancy: 5

Phone #: (650)616-8959

Program Name: BRENNER HOUSE Record ID: 410005RN Legal Name: PROJECT NINETY Service Type: RES

Address: 535 BADEN AVENUE Resident Capacity: 6

City, State: SOUTH SAN FRANCISCO, CA 94080 Total Occupancy: 6

Phone #: (650)579-7881

Program Name: PROJECT NINETY Record ID: 410005NN Legal Name: PROJECT NINETY Service Type: RES

Address: 15D LEWIS Resident Capacity: 5

City, State: SOUTH SAN FRANCISO, CA 94080- Total Occupancy: 5

Phone #: (650)579-7881

Program Name:SIMMONS HOUSERecord ID:410005JNLegal Name:PROJECT NINETYService Type:RESAddress:31 NINTH AVENUEResident Capacity:6City, State:SAN MATEO, CA 94401Total Occupancy:6

Phone #: (650)579-7881

Program Name: CARNER HOUSE Record ID: 410005GN Legal Name: PROJECT NINETY Service Type: RES

Address: 1451 YOUNG STREET Resident Capacity: 6

City, State: SAN MATEO, CA 94401 Total Occupancy: 6

Phone #: (650)579-7881

Program Name: JAMES O'TOOLE CENTER Record ID: 410005AN Legal Name: PROJECT NINETY Service Type: RES

Address: 15 NINTH AVENUE Resident Capacity: 28

City, State: SAN MATEO, CA 94401 Total Occupancy: 28

Phone #: (650)579-7881

Program Name: MILLER HOUSE Record ID: 410005DN
Legal Name: PROJECT NINETY Service Type: RES

Address: 14 SOUTH NORFOLK STREET

Address: 14 SOUTH NORFOLK STREET Resident Capacity: 6
City, State: SAN MATEO, CA 94401 Total Occupancy: 6

Phone #: (650)579-7881

As of: 04/06/2005 San Mateo County

Program Name: BETTS HOUSE Record ID: 410005CN Legal Name: PROJECT NINETY Service Type: RES

Address: 29 NORTH GRANT STREET Resident Capacity: 6
City, State: SAN MATEO, CA 94401 Total Occupancy: 6

Phone #: (650)579-7881

Program Name: WORKING MAN'S PROGRAM
Legal Name: PROJECT NINETY, INC.
Address: 247 DELAWARE AVENUE, #A
City, State: SAN MATEO, CA 94401Record ID: 410005WN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (650)579-7882

Program Name: PYRAMID ALTERNATIVES Record ID: 410006EN
Legal Name: PYRAMID ALTERNATIVES, INC. Service Type: NON
Address: 225 SOUTH CABRILLO, SUITE 200A Resident Capacity: 0
City, State: HALF MOON BAY, CA 94019 Total Occupancy: 0

Phone #: (650)355-8787

Program Name: PYRAMID ALTERNATIVES Record ID: 410006AN Legal Name: PYRAMID ALTERNATIVES, INC. Service Type: NON Address: 480 MANOR PLAZA Resident Capacity: 0
City, State: PACIFICA, CA 94044 Total Occupancy: 0

Phone #: (650)355-8787

Program Name: PYRAMID ALTERNATIVES Record ID: 410006BN Legal Name: PYRAMID ALTERNATIVES, INC. Service Type: NON
Address: 1053 EL CAMINO REAL Resident Capacity: 0
City, State: SOUTH SAN FRANCISCO, CA 94080 Total Occupancy: 0

Phone #: (650)355-8787

Program Name: PYRAMID ALTERNATIVES Record ID: 410006CN Legal Name: PYRAMID ALTERNATIVES, INC. Service Type: NON
Address: 1590 EL CAMINO REAL Resident Capacity: 0
City, State: SAN BRUNO, CA 94066 Total Occupancy: 0

Phone #: (650)355-8787

Program Name:PERINATAL ADDICTION OUTREACH TEAM (PAOT); PRE-TO-THREE IIRecord ID:410036BNLegal Name:SAN MATEO COUNTYService Type:NONAddress:150 WEST 20TH AVENUEResident Capacity:0City, State:SAN MATEO, CA 94403-1341Total Occupancy:0

Phone #: (650)573-2808

Program Name: HOPE HOUSE III Record ID: 410013BN Legal Name: SAN MATEO COUNTY SERVICE LEAGUE Service Type: RES

Address: 3787-A AND 3787-B HOOVER STREET Resident Capacity: 6

City, State: REDWOOD CITY, CA 94063- Total Occupancy: 7

Phone #: (650)363-8735

As of: 04/06/2005 San Mateo County

Program Name: HOPE HOUSE Record ID: 410013AN Legal Name: SAN MATEO COUNTY SERVICE LEAGUE Service Type: RES

Address: 3789 HOOVER STREET Resident Capacity: 10

City, State: REDWOOD CITY, CA 94063 Total Occupancy: 14

Phone #: (650)363-8735

Program Name: SITIKE COUNSELING CENTER Record ID: 410023AN Legal Name: SITIKE SERVICE Type: NON

Address: 306 SPRUCE AVENUE Resident Capacity: 0

City, State: SOUTH SAN FRANCISCO, CA 94080 Total Occupancy: 0

Phone #: (650)589-9305

Program Name: MISSION HOUSE Record ID: 410017AN Legal Name: THE SOLIDARITY FELLOWSHIP, INC. Service Type: RES

Address: 1679 SOUTH NORFOLK STREET Resident Capacity: 6

City, State: SAN MATEO, CA 94402- Total Occupancy: 6

Phone #: (650)341-3803

Program Name: HILLSIDE HOUSE ONE
Legal Name: WOMEN'S RECOVERY ASSOCIATION OF SAN MATEO COUNTY, INC. Service Type: RES
Address: 27 NORTH HUMBOLDT AVENUE, UNIT A
City, State: SAN MATEO, CA 94401Total Occupancy: 6

Phone #: (650)348-6603

Program Name: THE ELMS Record ID: 410002AN

Legal Name: WOMEN'S RECOVERY ASSOCIATION OF SAN MATEO COUNTY, INC. Service Type: RES
Address: 202 EAST BELLEVUE AVENUE Resident Capacity: 15
City, State: SAN MATEO, CA 94401 Total Occupancy: 15

Phone #: (650)343-8401

Program Name: WOMEN'S RECOVERY ASSOCIATION - THE CENTER Record ID: 410002CN Legal Name: WOMEN'S RECOVERY ASSOCIATION OF SAN MATEO COUNTY, INC. Service Type: NON Address: 1450 CHAPIN AVENUE Resident Capacity: 0

City, State: BURLINGAME, CA 94010 Total Occupancy: 0

Phone #: (650)348-6603

Program Name: LAUREL HOUSE Record ID: 410002BN

Legal Name: WOMEN'S RECOVERY ASSOCIATION OF SAN MATEO COUNTY, INC. Service Type: RES
Address: 900 LAUREL AVENUE Resident Capacity: 12
City, State: SAN MATEO, CA 94401 Total Occupancy: 12

Phone #: (650)347-8808

Program Name: HILLSIDE HOUSE TOO Record ID: 410002JN

Legal Name: WOMEN'S RECOVERY ASSOCIATION OF SAN MATEO COUNTY, INC. Service Type: RES Address: 27 NORTH HUMBOLDT AVENUE, UNIT B Resident Capacity: 5 City, State: SAN MATEO, CA 94401- Total Occupancy: 5

Phone #: (650)348-6603

As of: 04/06/2005 San Mateo County

Program Name: INSIGHTS Record ID: 410038BN Legal Name: YOUTH AND FAMILY ENRICHMENT SERVICES Service Type: NON Address: 85 WASHINGTON STREET Resident Capacity: 0

Address: 85 WASHINGTON STREET Resident Capacity: 0
City, State: DALY CITY, CA 94015- Total Occupancy: 0

Phone #: (650)755-0858

Program Name: ARCHWAY

Record ID: 410038AN

Service Type: NON

Legal Name: YOUTH AND FAMILY ENRICHMENT SERVICES

Address: 609 PRICE STREET, ROOMS 101, 106, 107, 201, AND 205

City, State: REDWOOD CITY, CA 94306
Total Occupancy: 0

Phone #: (650)366-8433

Program Name: FIRST CHANCE NORTH Record ID: 410038CN

Legal Name: YOUTH AND FAMILY ENRICHMENT SERVICES

Address: 383 EAST GRAND AVENUE, SUITE D

City, State: SOUTH SAN FRANCISCO, CA 94080
Total Occupancy: 0

Phone #: (650)952-3304

Program Name: FIRST CHANCE SOUTH Record ID: 410038DN

Legal Name:YOUTH AND FAMILY ENRICHMENT SERVICESService Type:NONAddress:335 QUARRYResident Capacity:0

City, State: SAN CARLOS, CA 94070- Total Occupancy: 0

Phone #: (650)595-8165

Program Name: WOMEN'S ENRICHMENT CENTER Record ID: 410038EN

Legal Name:YOUTH AND FAMILY ENRICHMENT SERVICESService Type:NONAddress:200 INDUSTRIAL ROAD, #90Resident Capacity:0City, State:SAN CARLOS, CA 94070-Total Occupancy:0

Phone #: (650)591-3636

As of: 04/06/2005 Santa Barbara County

Program Name: A SPIRITUAL ABODE, INC. Record ID: 420029AN
Legal Name: A SPIRITUAL ABODE, INCORPORATED Service Type: RES-DETOX

Address: 830 WEST CHURCH STREET Resident Capacity: 13
City, State: SANTA MARIA, CA 93454- Total Occupancy: 13

Phone #: (805)925-1352

Program Name: CASA SERENA RESIDENTIAL RECOVERY PROGRAM
Legal Name: CASA SERENA
Service Type: RES

Address: 147 OLIVER ROAD Resident Capacity: 6
City, State: SANTA BARBARA, CA 93105- Total Occupancy: 18

Phone #: (805)966-1260

Program Name: CASA SERENA RESIDENTIAL RECOVERY PROGRAM Record ID: 420024BN

Legal Name:CASA SERENAService Type:RESAddress:1922 AND 1924 CASTILLO STREETResident Capacity:10City, State:SANTA BARBARA, CA 93101-Total Occupancy:10

Phone #: (805)966-1260

Program Name: CASA SERENA RESIDENTIAL RECOVERY PROGRAM
Legal Name: CASA SERENA
Record ID: 420024AN
Service Type: RES

Address: 1515 BATH STREET

City, State: SANTA BARBARA, CA 93101
Total Occupancy: 22

Phone #: (805)564-8701

Program Name: CENTRAL COAST HEADWAY-LOMPOC O/P TREATMENT PROGRAM Record ID: 420013BN

Legal Name: CENTRAL COAST HEADWAY, INC.

Address: 115 EAST COLLEGE AVENUE, SUITES 15 AND 16

City, State: LOMPOC, CA 93436

Total Occupancy: 0

Phone #: (805)737-0015

Program Name: CENTRAL COAST HEADWAY - SANTA MARIA O/P TREATMENT PROG Record ID: 420013AN

Legal Name:CENTRAL COAST HEADWAY, INC.Service Type:NONAddress:318 WEST CARMEN LANEResident Capacity:0City, State:SANTA MARIA, CA 93458-7754Total Occupancy:0

Phone #: (805)922-2106

Program Name: PROJECT RECOVERY - ADULT OUTPATIENT TREATMENT PROGRAM Record ID: 420022AN

Legal Name:COUNCIL ON ALCOHOLISM AND DRUG ABUSEService Type:NONAddress:133 EAST HALEY STREETResident Capacity:0City, State:SANTA BARBARA, CA 93101-Total Occupancy:0

Phone #: (805)564-6057

Program Name: PROJECT RECOVERY RESIDENTIAL DETOX PROGRAM

Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE

Record ID: 420022EN

Service Type: RES-DETOX

Address: 816 CACIQUE STREET Resident Capacity: 12
City, State: SANTA BARBARA, CA 93103Total Occupancy: 12

Phone #: (805)564-6057

As of: 04/06/2005 Santa Barbara County

Program Name: DANIEL	BRYANT YOUTH AND FAMILY TREATMENT CENTER	Record ID:	420022BN
Legal Name: COUNC	IL ON ALCOHOLISM AND DRUG ABUSE	Service Type:	NON
Address: 25 WEST	Γ ANAPAMU STREET	Resident Capacity:	0
City, State: SANTA	BARBARA, CA 93101-	Total Occupancy:	0

Phone #: (805)730-7575

Program Name: SANTA MARIA TREATMENT PROGRAMS
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE
Address: 526 EAST CHAPEL STREET
City, State: SANTA MARIA, CA 93454Record ID: 420022CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (805)928-0993

Program Name: PC1000 Record ID: 420022DN
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE Service Type: NON
Address: 232 EAST CANON PERDIDO STREET Resident Capacity: 0
City, State: SANTA BARBARA, CA 93101- Total Occupancy: 0

Phone #: (805)963-1433

Program Name: FAMILY LIFE COUNSELING SERVICE, INC.

Legal Name: FAMILY LIFE COUNSELING SERVICE, INC.

Address: 101 CIVIC CENTER PLAZA

City, State: LOMPOC, CA 93436
Record ID: 420021BN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (805)737-1533

Program Name: FAMILY LIFE COUNSELING SERVICE, INC.

Legal Name: FAMILY LIFE COUNSELING SERVICE, INC.

Address: 124 W. CARMEN LANE, SUITE C

City, State: SANTA MARIA, CA 93454-5244

Record ID: 420021AN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (805)346-8118

Program Name: RECOVERY POINT ACUTE CARE Record ID: 420010BN Legal Name: GOOD SAMARITAN SHELTER Service Type: DETOX
Address: 401 "B" WEST MORRISON STREET Resident Capacity: 12
City, State: SANTA MARIA, CA 93458- Total Occupancy: 12

Phone #: (805)347-3338

Program Name: SANTA MARIA CENTER FOR CHANGE Record ID: 420031BN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON
Address: 201 SOUTH MILLER, SUITE 104 Resident Capacity: 0
City, State: SANTA MARIA, CA 93454- Total Occupancy: 0

Phone #: (805)925-9811

Program Name: SANTA BARBARA CENTER FOR CHANGE Record ID: 420031AN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON Address: 2950 STATE STREET, SUITE A Resident Capacity: 0 City, State: SANTA BARBARA, CA 93105- Total Occupancy: 0

Phone #: (805)898-1018

As of: 04/06/2005

Santa Barbara County

Program Name: SANCTUARY PSYCHIATRIC CENTERS Record ID: 420026AN Legal Name: SANCTUARY HOUSE OF SANTA BARBARA, INC. Service Type: NON Resident Capacity: 0 Address: 222 WEST VALERIO, REAR BUILDING Total Occupancy: 0 City, State: SANTA BARBARA, CA 93101-

Phone #: (805)569-2785

Program Name: COTTAGE RESIDENTIAL CENTER Record ID: 420017AN Legal Name: SANTA BARBARA COTTAGE HOSPITAL Service Type: RES Resident Capacity: 14 Address: 2838 STATE STREET Total Occupancy: 14 City, State: SANTA BARBARA, CA 93105-

Phone #: (805)569-7815

Program Name: BETHEL HOUSE Record ID: 420016BN Service Type: RES Legal Name: SANTA BARBARA RESCUE MISSION Resident Capacity: 25 Address: 24 WEST ARRELLEGA STREET Total Occupancy: 25 City, State: SANTA BARBARA, CA 93101-

Phone #: (805)966-1316

Program Name: SANTA BARBARA RESCUE MISSION - RECOVERY PROGRAM Record ID: 420016AN

Service Type: RES Legal Name: SANTA BARBARA RESCUE MISSION Address: 535 EAST YANONALI STREET Resident Capacity: 115 City, State: SANTA BARBARA, CA 93103-Total Occupancy: 268

Phone #: (805)966-1316

Record ID: 420028BN Program Name: THE RIGHT DETOUR Service Type: NON Legal Name: THE RIGHT DETOUR, INC. Address: 115 HERITAGE WALK Resident Capacity: 0 Total Occupancy: 0 City, State: SANTA MARIA, CA 93458-

Phone #: (805)349-7331

Program Name: SUBSTANCE ABUSE COUNSELING SERVICES Record ID: 420025BN

Legal Name: ZONA SECA Service Type: NON Address: 26 WEST FIGUEROA STREET Resident Capacity: 0 Total Occupancy: 0

City, State: SANTA BARBARA, CA 93101-

Phone #: (805)963-8961

Record ID: 420025AN Program Name: YOUTH AND FAMILY TREATMENT CENTER

Legal Name: ZONA SECA Service Type: NON Address: 218 NORTH I STREET Resident Capacity: 0 Total Occupancy: 0 City, State: LOMPOC, CA 93436-

Phone #: (805)740-9799

As of: 04/06/2005 Santa Clara County

City, State: SAN JOSE, CA 95112-

Phone #: (408)294-2277

AS 01. 04/00/.			
Legal Name: Address:	ADOLESCENT COUNSELING SERVICES ADOLESCENT COUNSELING SERVICES 445 SHERMAN AVENUE PALO ALTO, CA 94306-	Record ID: Service Type: Resident Capacity: Total Occupancy:	NON 0
	(650)424-0852	Total Occupancy.	Ü
_	BROWNING HOME	Record ID:	
-	ADVENT GROUP MINISTRIES, INC.	Service Type:	
	3098 BROWNING AVENUE	Resident Capacity:	
•	SAN JOSE, CA 95119 (408)371-1891	Total Occupancy:	0
_	GATEWAY HOME	Record ID:	
•	ADVENT GROUP MINISTRIES, INC.	Service Type:	
	1960 CHURCH AVENUE	Resident Capacity:	
•	SAN MARTIN, CA 95046 (408)683-2099	Total Occupancy:	0
Program Name:	GENESIS HOME	Record ID:	430038FN
Legal Name:	ADVENT GROUP MINISTRIES, INC.	Service Type:	DSS
	7455 FURLONG AVENUE	Resident Capacity:	
· ·	GILROY, CA 95020	Total Occupancy:	0
Phone #:	(408)847-0504		
Program Name:	LAURAL HOME	Record ID:	430038DN
Legal Name:	ADVENT GROUP MINISTRIES, INC.	Service Type:	DSS
	865 BLACK WALNUT COURT	Resident Capacity:	
· ·	MORGAN HILL, CA 95037	Total Occupancy:	0
Phone #:	(408)779-5841		
C	SOUTH VALLEY HOME	Record ID:	
•	ADVENT GROUP MINISTRIES, INC.	Service Type:	
	4305 ARPEGGIO AVENUE SAN JOSE, CA 95136	Resident Capacity: Total Occupancy:	
•	(408)226-2389	Total Occupancy.	U
Program Name:	SUMMIT HOME	Record ID:	430038CN
Legal Name:	ADVENT GROUP MINISTRIES, INC.	Service Type:	DSS
Address:	1200 WEST EDMUNDSON AVENUE	Resident Capacity:	
•	MORGAN HILL, CA 95037	Total Occupancy:	0
Phone #:	(408)779-1492		
_	AMICUS HOUSE, INC.	Record ID:	
-	AMICUS HOUSE, INC.	Service Type:	
	190 NORTH 13TH STREET	Resident Capacity:	6

Total Occupancy: 6

As of: 04/06/2005 Santa Clara County

Program Name: ARH-BENNY MCKEOWN CENTER Record ID: 430001AN Legal Name: ARH RECOVERY HOMES, INC. Service Type: RES

Address: 1281 FLEMING AVENUE Resident Capacity: 27

City, State: SAN JOSE, CA 95127 Total Occupancy: 27

Phone #: (408)236-6657

Program Name: BECK HOUSE Record ID: 430001FN
Legal Name: ARH RECOVERY HOMES, INC. Service Type: RES

Address: 2345 AND 2355 MATHER DRIVE Resident Capacity: 42
City, State: SAN JOSE, CA 95116 Total Occupancy: 42

Phone #: (408)937-7083

Program Name: ARH-HOUSE ON THE HILL Record ID: 430001EN
Legal Name: ARH RECOVERY HOMES, INC. Service Type: RES
Address: 9505 MALECH ROAD Resident Capacity: 20
City, State: SAN JOSE, CA 95138 Total Occupancy: 42

Phone #: (408)236-6657

Program Name:PATE HOUSERecord ID: 430001GNLegal Name:ARH RECOVERY HOMES, INC.Service Type: RESAddress:35 SOUTH 12TH STREETResident Capacity: 0

Total Occupancy: 0

Phone #: (408)295-4103

City, State: SAN JOSE, CA 95112-

Program Name: ARH-MARIPOSA LODGE Record ID: 430001DN Legal Name: ARH RECOVERY HOMES, INC. Service Type: RES-DETOX

Address: 9500 MALECH ROAD Resident Capacity: 88
City, State: SAN JOSE, CA 95138-2000 Total Occupancy: 88

Phone #: (408)236-6657

Program Name: THE PLACE Record ID: 430036AN Legal Name: ASIAN AMERICAN RECOVERY SERVICES, INC. Service Type: NON Address: 1370 TULLY ROAD, SUITE 501 Resident Capacity: 0
City, State: SAN JOSE, CA 95122 Total Occupancy: 0

Phone #: (408)271-3900

Program Name: COUNTYWIDE ALCOHOL AND DRUG SERVICES Record ID: 430044AN Legal Name: C.A.D.S., INC. Service Type: NON

Address: 1 WEST CAMPBELL AVENUE, SUITE B-29 Resident Capacity: 0

City, State: CAMPBELL, CA 95008- Total Occupancy: 0

Phone #: (408)370-9688

Program Name: CITY TEAM MINISTRIES SAN JOSE MEN'S DISCIPLESHIP AND RECOV Record ID: 430052AN

Legal Name: CITY TEAM MINISTRIES

Address: 580 CHARLES STREET AND 1174 BAYSHORE HIGHWAY

City, State: SAN JOSE, CA 95112
Total Occupancy: 0

Phone #: (408)288-2185

As of: 04/06/2005 Santa Clara County

Program Name: COMBINED ADDICTS AND PROFESSIONAL SERVICES OUTPATIENT F
Legal Name: COMBINED ADDICTS AND PROFESSIONAL SERVICES

Record ID: 430017BN
Service Type: NON

Address: 66 EAST ROSEMARY STREET Resident Capacity: 0 City, State: SAN JOSE, CA 95112-5835 Total Occupancy: 0

Phone #: (408)441-6088

Program Name: CAPS - ROSEMARY'S WAY
Legal Name: COMBINED ADDICTS AND PROFESSIONALS SERVICES
Address: 398 SOUTH 12TH STREET
City, State: SAN JOSE, CA 95112
Record ID: 430017AN
Service Type: RES
Resident Capacity: 23
Total Occupancy: 23

Phone #: (408)995-3827

Program Name: COMMUNITY SOLUTIONS ALCOHOL AND OTHER DRUG OUTPATIEN Record ID: 430043BN Legal Name: COMMUNITY SOLUTIONS FOR CHILDREN, FAMILIES AND INDIVIDU Service Type: NON

Address: 6980 CHESTNUT STREET

City, State: GILROY, CA 95020
Total Occupancy: 0

Phone #: (408)842-7138

Program Name: SOBRIETY THROUGH EDUCATION AND PEER SUPPORT - 36 Record ID: 430048AN Legal Name: ECONOMIC AND SOCIAL OPPORTUNITIES, INC. Service Type: NON Address: 1445 OAKLAND ROAD Resident Capacity: 0

City, State: SAN JOSE, CA 95112- Total Occupancy: 0

Phone #: (408)971-0888

Program Name: THE FREEDOM CENTER EL CENTRO DE LIBERTAD

Legal Name: EL CENTRO DE LIBERTAD

Address: 460 SOUTH CALIFORNIA AVENUE, SUITE 300

City, State: PALO ALTO, CA 94306
Record ID: 430056AN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (650)289-0070

Program Name: FAMILY AND CHILDREN SERVICES--SUBSTANCE ABUSE TREATMEN Record ID: 430046AN Legal Name: FAMILY AND CHILDREN SERVICES Service Type: NON Address: 950 WEST JULIAN STREET Resident Capacity: 0

City, State: SAN JOSE, CA 95126Total Occupancy: 0

Phone #: (408)288-6200

Program Name: FRESH START RECOVERY SYSTEMS
Legal Name: FRESH START RECOVERY
Address: 608 BRYAN AVENUE
City, State: SUNNYVALE, CA 94086Record ID: 430058AP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (510)258-4155

Program Name: HORIZON SOUTH Record ID: 430021AN
Legal Name: HORIZON SERVICES, INCORPORATED Service Type: RES-DETOX

Address: 650 SOUTH BASCOM AVENUE Resident Capacity: 41 City, State: SAN JOSE, CA 95128 Total Occupancy: 41

Phone #: (408)295-6675

As of: 04/06/2005 Santa Clara County

Program Name: INDIAN HEALTH CENTER OF SANTA CLARA VALLEY OUTPATIENT A
Legal Name: INDIAN HEALTH CENTER OF SANTA CLARA VALLEY
Service Type: NON

Address: 1333 MERIDIAN AVENUE Resident Capacity: 0
City, State: SAN JOSE, CA 95125- Total Occupancy: 0

Phone #: (408)445-3400

Program Name: INDIAN HEALTH CENTER OF SANTA CLARA VALLEY-OUTPATIENT A Record ID: 430047CN

Legal Name: INDIAN HEALTH CENTER OF SANTA CLARA VALLEY

Address: 555 NORTH FIRST STREET, SUITE 100

City, State: SAN JOSE, CA 95112
Total Occupancy: 0

Phone #: (408)350-2400

Program Name: LIFECHOICES TREATMENT SERVICES OUTPATIENT PROGRAM Record ID: 430049BN

Legal Name: LIFECHOICES TREATMENT SERVICES

Address: 1190 SOUTH BASCOM AV ENUE, #222

City, State: SAN JOSE, CA 95125
Total Occupancy: 0

Phone #: (408)971-7811

Program Name: LIFE CHOICES Record ID: 430049AN

Legal Name:LIFECHOICES TREATMENT SERVICES, INC.Service Type:RESAddress:1157 EAST TAYLOR STREETResident Capacity:6City, State:SAN JOSE, CA 95112-Total Occupancy:8

Phone #: (408)971-7811

Program Name: OCCUPATIONAL HEALTH SERVICES, INC. Record ID: 430055AP

Legal Name:MHNService Type:NONAddress:465 FAIRCHILD, SUITE 210Resident Capacity:0City, State:MOUNTAIN VIEW, CA 94043-Total Occupancy:0

Phone #: (650)988-4825

Program Name: NEW LIFE RECOVERY CENTERS Record ID: 430053AP

Legal Name:NEW LIFE RECOVERY CENTERSService Type:RESAddress:473 NORTH SAN PEDROResident Capacity:19City, State:SAN JOSE, CA 95110-Total Occupancy:19

Phone #: (408)297-1182

Program Name: HOUSE OF DAWN Record ID: 430059AN

Legal Name:OPERATION DAWNService Type:RESAddress:5034 PAGE MILL DRIVEResident Capacity:6City, State:SAN JOSE, CA 95111-4055Total Occupancy:6

Phone #: (408)362-0121

Program Name: PATHWAY SOCIETY, INC. Record ID: 430016CN

Legal Name:PATHWAY SOCIETYService Type:NONAddress:1825 DE LA CRUZ BOULEVARD, SUITE 103Resident Capacity:0City, State:SANTA CLARA, CA 95050-Total Occupancy:0

Phone #: (408)492-8986

As of: 04/06/2005 Santa Clara County

Program Name:PATHWAY HOUSERecord ID:430016ANLegal Name:PATHWAY SOCIETYService Type:RESAddress:102 SOUTH 11TH STREETResident Capacity:65City, State:SAN JOSE, CA 95112Total Occupancy:65

Phone #: (408)998-5191

Program Name: PATHWAY OUTPATIENT CENTER
Legal Name: PATHWAY SOCIETY, INC.
Address: 1659 SCOTT BOULEVARD, SUITE 5, 22, AND 32
City, State: SANTA CLARA, CA 95050Total Occupancy: 0

Phone #: (408)244-1834

Program Name: NINTH STREET HOUSE Record ID: 430051AN Legal Name: PROJECT NINETY Service Type: RES

Address: 561 SOUTH 9TH STREET Resident Capacity: 10

City, State: SAN JOSE, CA 95112- Total Occupancy: 10

Phone #: (650)579-7881

Program Name: PROJECT NINETY THIRD STREET HOUSE Record ID: 430051BN Legal Name: PROJECT NINETY, INC. Service Type: RES

Address: 792 SOUTH THIRD STREET Resident Capacity: 10

City, State: SAN JOSE, CA 95112- Total Occupancy: 10

Phone #: (650)579-7882

Program Name: RECOVERY CONNECTIONS TREATMENT SERVICES
Legal Name: RECOVERY CONNECTIONS TREATMENT SERVICES
Address: 1723 HAMILTON AVENUE, SUITE D
City, State: SAN JOSE, CA 95125Record ID: 430057AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (408)267-2901

Program Name:WILLOW HOMERecord ID:430018APLegal Name:SAAVEDRA, CARLOSService Type:RESAddress:808 PALM STREETResident Capacity:16City, State:SAN JOSE, CA 95110Total Occupancy:17

Phone #: (408)294-5072

Program Name: SUPPORT SYSTEMS HOMES 3 Record ID: 430027DP
Legal Name: SUPPORT SYSTEMS HOMES Service Type: RES
Address: 1032 THORNTON WAY Resident Capacity: 6
City, State: SAN JOSE, CA 95128 Total Occupancy: 6

Phone #: (408)370-9688

Program Name:SUPPORT SYSTEMS HOMES OUTPATIENT AND DAY TREATMENT PR
Legal Name:Record ID:430027GPLegal Name:SUPPORT SYSTEMS HOMES, INCORPORATEDService Type:NONAddress:1 WEST CAMPBELL AVENUE, SUITE B-27Resident Capacity:0

City, State: CAMPBELL, CA 95008-1004 Total Occupancy: 0

Phone #: (408)370-9688

As of: 04/06/2005

Santa Clara County

Program Name: SUPPORT SYSTEMS HOMES ALCOHOL AND DRUG TREATMENT CEN'
Legal Name: SUPPORT SYSTEMS HOMES, INCORPORATED

Record ID: 430027HP
Service Type: RES-DETOX

Address: 264 NORTH MORRISON AVENUE Resident Capacity: 32 City, State: SAN JOSE, CA 95126- Total Occupancy: 32

Phone #: (408)370-9688

Program Name: ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT Record ID: 430042AN Legal Name: THE ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT OF SANT Service Type: NON Address: 2400 MOORPARK AVENUE, SUITES 111, 210, 300, AND 312 Resident Capacity: 0 City, State: SAN JOSE, CA 95128- Total Occupancy: 0

Phone #: (408)975-2730

Program Name: THE CAMP - OUTPATIENT SERVICES Record ID: 430034AP Legal Name: THE CAMP RECOVERY CENTERS, L.P. Service Type: NON

Address: 105 NORTH BASCOM AVENUE, SUITE 205 Resident Capacity: 0

City, State: SAN JOSE, CA 95128- Total Occupancy: 0

Phone #: (408)378-1799

Program Name: PROYECTO PRIMAVERA ADULT OUTPATIENT PROGRAM
Legal Name: THE GARDNER FAMILY CARE CORPORATION
Address: 614 TULLY ROAD
City, State: SAN JOSE, CA 95111Record ID: 430045BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (408)977-1591

Program Name: CALWORKS DUAL DIAGNOSIS PROGRAM
Legal Name: THE GARDNER FAMILY CARE CORPORATION
Address: 160 EAST VIRGINIA STREET, SUITE 280
City, State: SAN JOSE, CA 95112Record ID: 430045AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (408)287-6200

Program Name: WEST VALLEY COLLEGE C-DAAP
Legal Name: WEST VALLEY-MISSION COMMUNITY COLLEGE DISTRICT
Address: 330 WEST HEDDING STREET, SUITE 203
City, State: SAN JOSE, CA 95110Record ID: 430050AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (408)993-8747

As of: 04/06/2005 Santa Cruz County

Program Name: JANUS WATSONVILLE ALCOHOL AND DRUG TREATMENT CENTER
Legal Name: JANUS OF SANTA CRUZ
Record ID: 440003FN
Service Type: NON

Address: 85 NIELSON STREET Resident Capacity: 0
City, State: WATSONVILLE, CA 95076Total Occupancy: 0

Phone #: (831)761-5667

Program Name: OUT-PATIENT CLIENT SERVICES Record ID: 440003AN Legal Name: JANUS OF SANTA CRUZ Service Type: NON

Address: 200 SEVENTH AVENUE Resident Capacity: 0
City, State: SANTA CRUZ, CA 95062 Total Occupancy: 0

Phone #: (831)462-1060

Program Name: RESIDENTIAL TREATMENT CENTER & SPECIAL CARE UNIT Record ID: 440003BN

Legal Name: JANUS OF SANTA CRUZ Service Type: RES-DETOX

Address: 200 SEVENTH AVENUE Resident Capacity: 40 City, State: SANTA CRUZ, CA 95062 Total Occupancy: 40

Phone #: (831)462-1060

Program Name: MONDANARO-BASKIN CENTER FOR WOMEN & CHILDREN Record ID: 440003DN

Legal Name:JANUS OF SANTA CRUZService Type:RESAddress:1314 OCEAN STREETResident Capacity:10City, State:SANTA CRUZ, CA 95060Total Occupancy:25

Phone #: (831)423-9015

Program Name: MONDANARO BASKIN CENTER Record ID: 440003EN

Legal Name:JANUS OF SANTA CRUZService Type:NONAddress:1314 OCEAN STREETResident Capacity:0City, State:SANTA CRUZ, CA 95060Total Occupancy:0

Phone #: (831)423-9015

Program Name: NARCONON OF NORTHERN CALIFORNIA Record ID: 440009CN
Legal Name: NARCONON OF NORTHERN CALIFORNIA Service Type: RES-DETOX

Address: 262 GAFFEY ROAD Resident Capacity: 40

City, State: WATSONVILLE, CA 95076
Total Occupancy: 40

Phone #: (831)768-7190

Program Name: NARCONON OF NORTHERN CALIFORNIA-IOP/DAY TREATMENT Record ID: 440009DN

Legal Name:NARCONON OF NORTHERN CALIFORNIAService Type:NONAddress:262 GAFFEY ROADResident Capacity:0City, State:WATSONVILLE, CA 95076-Total Occupancy:0

Phone #: (831)768-7190

Program Name: NEW LIFE CENTER Record ID: 440010AN

Legal Name:NEW LIFE COMMUNITY SERVICES, INC.Service Type:RESAddress:707 AND 717 FAIR AVENUEResident Capacity:38City, State:SANTA CRUZ, CA 95060Total Occupancy:57

Phone #: (831)427-1007

As of: 04/06/2005 Santa Cruz County

Program Name: SOBRIETY WORKS Record ID: 440012AP
Legal Name: RIKKI RAP, INC. Service Type: NON
Address: 1658 SOQUEL DRIVE, SUITE B Resident Capacity: 0

Total Occupancy: 0

City, State: SANTA CRUZ, CA 95065-Phone #: (831)476-1747

Program Name: FENIX OUTPATIENT SERVICES
Legal Name: SANTA CRUZ COMMUNITY COUNSELING CENTER

Record ID: 440001EN
Service Type: NON

Address: 10 ALEXANDER STREET Resident Capacity: 0
City, State: WATSONVILLE, CA 95076- Total Occupancy: 0

Phone #: (831)722-5915

Program Name: HERMANAS RECOVERY HOME Record ID: 440001DN Legal Name: SANTA CRUZ COMMUNITY COUNSELING CENTER Service Type: RES

Address: 640 RODRIGUEZ STREET

City, State: WATSONVILLE, CA 95076
Resident Capacity: 17

Total Occupancy: 17

Phone #: (831)722-2471

Program Name: SANTA CRUZ RESIDENTIAL RECOVERY Record ID: 440008AN

Legal Name:SANTA CRUZ COMMUNITY COUNSELING CENTERService Type:RESAddress:125 RIGG AND 121 WEEKS STREETSResident Capacity:38City, State:SANTA CRUZ, CA 95060Total Occupancy:42

Phone #: (831)423-3890

Program Name: SI SE PUEDE Record ID: 440008LN

Legal Name:SANTA CRUZ COMMUNITY COUNSELING CENTERService Type:RESAddress:161 MILES LANEResident Capacity:23City, State:WATSONVILLE, CA 95076Total Occupancy:23

Phone #: (831)761-5422

Program Name: ALTO COUNSELING CENTER - NORTH Record ID: 440008HN

Legal Name:SANTA CRUZ COMMUNITY COUNSELING CENTERService Type:NONAddress:271 WATER STREETResident Capacity:0City, State:SANTA CRUZ, CA 95060-Total Occupancy:0

Phone #: (831)423-2003

Program Name: PIONEER HOUSE Record ID: 440008BN

Legal Name:SANTA CRUZ COMMUNITY COUNSELING CENTERService Type:NONAddress:290 PIONEER STREETResident Capacity:0City, State:SANTA CRUZ, CA 95060-Total Occupancy:0

Phone #: (831)459-0444

Program Name: THE CAMP RECOVERY CENTERS-SECTION II Record ID: 440011BP

Legal Name: THE CAMP RECOVERY CENTER, L.P.Service Type: DSSAddress: 3192 GLEN CANYON ROADResident Capacity: 0City, State: SCOTTS VALLEY, CA 95066-4916Total Occupancy: 0

Phone #: (831)438-1868

As of: 04/06/2005

Program Name: THE CAMP

Legal Name: THE CAMP RECOVERY CENTERS, L. P.

Address: 3192 GLEN CANYON ROAD City, State: SCOTTS VALLEY, CA 95066

Phone #: (831)438-1868

Record ID: 440011AP Service Type: RES-DETOX

Resident Capacity: 56
Total Occupancy: 60

As of: 04/06/2005 **Shasta County**

Program Name: REDEEMED RECOVERY SERVICES Record ID: 450008AN Legal Name: CHURCH OF THE REDEEMED OF REDDING, CALIFORNIA Service Type: NON Address: 844 BUTTE STREET Resident Capacity: 0

Total Occupancy: 0

Total Occupancy: 0

Phone #: (530)241-5518

City, State: REDDING, CA 96001-

Program Name: EMPIRE RECOVERY CENTER Record ID: 450001AN
Legal Name: EMPIRE HOTEL, EHARC, INC. Service Type: RES-DETOX

Address: 1237 CALIFORNIA STREET Resident Capacity: 42
City, State: REDDING, CA 96001 Total Occupancy: 42

Phone #: (530)243-7470

Program Name: EMPIRE RECOVERY OUTPATIENT SERVICES

Legal Name: EMPIRE RECOVERY CENTER

Service Type: NON

A Manuary Sold SHASTA DAM BOWN EVAND.

Address: 5010 SHASTA DAM BOULEVARD Resident Capacity: 0
City, State: SHASTA LAKE, CA 96019- Total Occupancy: 0

Phone #: (530)275-1076

Program Name: MAYERS CROSSROADS CLINIC Record ID: 450016AN Legal Name: MAYERS MEMORIAL HOSPITAL DISTRICT Service Type: NON Address: 20597 COMMERCE WAY Resident Capacity: 0

Phone #: (530)335-3800

City, State: BURNEY, CA 96065-

Program Name: FAITH HOUSE Record ID: 450017AN Legal Name: MY FAITH HOUSE, INC. Service Type: RES

Address: 12319 LAKE BOULEVARD

City, State: REDDING, CA 96003
Setvice Type. Resident Capacity: 6

Total Occupancy: 6

Phone #: (530)242-5711

Program Name: NORTHERN VALLEY CATHOLIC SOCIAL SERVICE, INC. S.T.O.P. PROC Legal Name: NORTHERN VALLEY CATHOLIC SOCIAL SERVICE, INC. Service Type: NON

Address: 2400 WASHINGTON AVENUE Resident Capacity: 0 City, State: REDDING, CA 96001- Total Occupancy: 0

Phone #: (530)241-0552

Program Name: ANDERSON OUTPATIENT PROGRAM Record ID: 450012AN Legal Name: RIGHT ROAD RECOVERY PROGRAMS, INC. Service Type: NON
Address: 2326 AND 2336 BALLS FERRY ROAD Resident Capacity: 0
City, State: ANDERSON, CA 96007- Total Occupancy: 0

Phone #: (530)365-8523

Program Name: SHASTA COUNTY ALCOHOL AND DRUG PROGRAMS (SACPA)

Legal Name: SHASTA COUNTY ALCOHOL AND DRUG PROGRAMS (SACPA)

Record ID: 450015AN

Service Type: NON

Legal Name: SHASTA COUNTY ALCOHOL AND DRUG PROGRAMS (SACPA)

Address: 1415 MARKET STREET

City, State: REDDING, CA 96001
Service Type: NC

Resident Capacity: 0

Total Occupancy: 0

Phone #: (530)229-8310

As of: 04/06/2005 **Shasta County**

Program Name: SHASTA RECOVERY CENTER Record ID: 450010AP Legal Name: SMITH, RON W. Service Type: NON

Address: 2115 HOWARD STREET, SUITE C Resident Capacity: 0
City, State: ANDERSON, CA 96007- Total Occupancy: 0

Phone #: (530)365-1160

Program Name: THE CORNERSTONE MEN'S RESIDENTIAL TREATMENT PROGRAM AI Record ID: 450006AN Legal Name: THE CORNERSTONE RECOVERY SYSTEMS Service Type: RES

Address: 2096 CASCADE BOULEVARD

City, State: SHASTA LAKE, CA 96019
Total Occupancy: 61

Phone #: (530)275-5622

Program Name: THE CORNERSTONE 2 Record ID: 450006BN Legal Name: THE CORNERSTONE RECOVERY SYSTEMS Service Type: RES

Address: 13144 BEAR MOUNTAIN ROAD Resident Capacity: 18
City, State: REDDING, CA 96003 Total Occupancy: 18

Phone #: (530)275-0906

Program Name: CHEMICAL DEPENDENCY INTENSIVE OUTPATIENT PROGRAM Record ID: 450011AP

Legal Name:THOMAS J. ANDREWS, M.D., INC.Service Type:NONAddress:2885 CHURN CREEK ROADResident Capacity:0City, State:REDDING, CA 96002-Total Occupancy:0

Phone #: (530)221-7474

Program Name: WILDERNESS RECOVERY CENTER Record ID: 450004AN Legal Name: WILDERNESS RECOVERY CENTER, INC. Service Type: DSS

Address: 19650 COVE ROAD Resident Capacity: 0

City, State: MONTGOMERY CREEK, CA 96065 Total Occupancy: 0

Phone #: (530)337-6724

As of: 04/06/2005

Program Name: SIERRA COUNTY HUMAN SERVICES
Legal Name: SIERRA COUNTY HUMAN SERVICES

Address: 704 MILL STREET City, State: LOYALTON, CA 96118-

Phone #: (530)993-6746

Record ID: 460001AN Service Type: NON Resident Capacity: 0 Total Occupancy: 0

As of: 04/06/2005

Program Name: SISKIYOU COUNTY ALCOHOL AND DRUG SERVICES

Legal Name: SISKIYOU COUNTY
Address: 2060 CAMPUS DRIVE
City, State: YREKA, CA 96097Phone #: (530)841-4890

Record ID: 470002AN Service Type: NON Resident Capacity: 0 Total Occupancy: 0

Solano County As of: 04/06/2005

Program Name: PRINCIPLES PROGRAM Record ID: 480027AN Legal Name: AMERICAN ALCOHOL AND DRUG RECOVERY FOUNDATION, INC. Service Type: RES

Resident Capacity: 6 Address: 7516 PADDON ROAD Total Occupancy: 6 City, State: VACAVILLE, CA 95688-

Phone #: (707)301-6234

Program Name: SHAMIA RECOVERY CENTER Record ID: 480002HN

Legal Name: BI-BETT Service Type: RES Address: 109 B OHIO STREET Resident Capacity: 4 Total Occupancy: 4

City, State: VALLEJO, CA 94590-

Phone #: (707)644-2577

Program Name: SHAMIA RECOVERY CENTER Record ID: 480002EN

Service Type: RES Legal Name: BI-BETT Resident Capacity: 4 Address: 109A OHIO STREET City, State: VALLEJO, CA 94590 Total Occupancy: 4

Phone #: (707)644-2577

Program Name: SHAMIA RECOVERY CENTER Record ID: 480002CN

Service Type: RES Legal Name: BI-BETT Address: 126, 126 1/2, AND 128 OHIO STREET Resident Capacity: 16 Total Occupancy: 16 City, State: VALLEJO, CA 94590

Phone #: (707)644-2577

Record ID: 480002GN Program Name: RECOVERY CONNECTION

Service Type: NON Legal Name: BI-BETT Address: 604 BROADWAY Resident Capacity: 0 Total Occupancy: 0 City, State: VALLEJO, CA 94590-

Phone #: (707)643-2748

Program Name: SOUTHERN SOLANO ALCOHOL COUNCIL Record ID: 480002BN

Legal Name: BI-BETT Service Type: RES-DETOX

Address: 419 PENNSYLVANIA STREET Resident Capacity: 9 Total Occupancy: 9 City, State: VALLEJO, CA 94590

Phone #: (707)643-8536

Record ID: 480018AN Program Name: LATINO FAMILY ALCOHOL AND DRUG CENTER OF SOLANO COUNT Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABU Service Type: NON

Address: 881 MARKHAM AVENUE Resident Capacity: 0 Total Occupancy: 0 City, State: VACAVILLE, CA 95688-2988

Phone #: (707)449-8014

Record ID: 480008AN Program Name: DIXON FAMILY SERVICES Service Type: NON

Legal Name: DIXON FAMILY SERVICES Address: 155 NORTH SECOND STREET Resident Capacity: 0 City, State: DIXON, CA 95620 Total Occupancy: 0

Phone #: (707)678-0442

Solano County As of: 04/06/2005

Program Name: GENESIS HOUSE Record ID: 480005AN Legal Name: GENESIS HOUSE, INC. Service Type: RES Resident Capacity: 19 Address: 1149 WARREN AVENUE Total Occupancy: 19 City, State: VALLEJO, CA 94591

Phone #: (707)552-5295

Program Name: GENESIS HOUSE II Record ID: 480005BN Legal Name: GENESIS HOUSE, INC. Service Type: RES Resident Capacity: 6 Address: 133 RENIDA STREET Total Occupancy: 6 City, State: VALLEJO, CA 94591

Phone #: (707)552-5295

Program Name: GENESIS HOUSE III Record ID: 480005CN Service Type: RES Legal Name: GENESIS HOUSE, INC. Resident Capacity: 6 Address: 1148 WARREN AVENUE City, State: VALLEJO, CA 94591 Total Occupancy: 6

Phone #: (707)552-5295

Program Name: HEALTHY PARTNERSHIPS Record ID: 480015BP Service Type: NON Legal Name: HEALTHY PARTNERSHIPS Address: 1735 ENTERPRISE DRIVE, BLDG 1, SUITE 105-A Resident Capacity: 0 Total Occupancy: 0

City, State: FAIRFIELD, CA 94533-

Phone #: (707)425-1799

Record ID: 480015AP Program Name: HEALTHY PARTNERSHIPS Service Type: NON Legal Name: HEALTHY PARTNERSHIPS Resident Capacity: 0 Address: 1286 CALLEN STREET, SUITE H City, State: VACAVILLE, CA 95688-Total Occupancy: 0

Phone #: (707)447-8982

Record ID: 480015CP Program Name: HEALTHY PARTNERSHIPS, INC. Legal Name: HEALTHY PARTNERSHIPS, INC. Service Type: NON Address: 255 NORTH LINCOLN STREET Resident Capacity: 0 City, State: DIXON, CA 95620-Total Occupancy: 0

Phone #: (707)631-3336

Record ID: 480022AP Program Name: ARCHWAY RECOVERY SERVICES Legal Name: JULIE LAKE, D.B.A., ARCHWAY RECOVERY SERVICES Service Type: RES Address: 1525 UNION AVENUE Resident Capacity: 16 Total Occupancy: 16 City, State: FAIRFIELD, CA 94533-

Phone #: (707)435-1804

Record ID: 480028AN Program Name: KATARGEO Service Type: NON Legal Name: KATARGEO

Address: 1652 C FAIRGROUNDS DRIVE Resident Capacity: 0 City, State: VALLEJO, CA 94589-Total Occupancy: 0

Phone #: (707)557-7020

As of: 04/06/2005 *Solano County*

Program Name: LATINO COMMISSION - CASA NATAL Record ID: 480026AN Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: RES

Address: 5360 DIXON AVENUE Resident Capacity: 6
City, State: WEST DIXON, CA 95620Total Occupancy: 6

Phone #: (707)678-6343

Program Name: LEADERS IN COMMUNITY ALTERNATIVES
Legal Name: LEADERS IN COMMUNITY ALTERNATIVES, INC.
Address: 827 MISSOURI STREET, SUITE 1
City, State: FAIRFIELD, CA 94533Record ID: 480020AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)421-0249

Program Name: PATH TO RECOVERY Record ID: 480021AP
Legal Name: PATH TO RECOVERY, INC. Service Type: RES-DETOX

Address: 645 RUSSELL STREET Resident Capacity: 6
City, State: VALLEJO, CA 94591- Total Occupancy: 8

Phone #: (707)642-6701

Program Name: PHARMATOX Record ID: 480016AP Legal Name: PHARMATOX, INC. Service Type: NON
Address: 1143 MISSOURI STREET Resident Capacity: 0
City, State: FAIRFIELD, CA 94533- Total Occupancy: 0

Phone #: (707)435-8042

Program Name: HOPE, PHOENIX PROGRAMS, INC.
Legal Name: PHOIENIX PROGRAMS, INCORPORATED
Address: 301 GEORGIA STREET, SUITE 355
City, State: VALLEJO, CA 94590Record ID: 480023AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)558-8195

Program Name: RIGHTEOUS RE-ENTRY Record ID: 480024AN

Legal Name:RIGHTEOUS RE-ENTRY CORPORATIONService Type:RESAddress:400 CINNAMON WAYResident Capacity:6City, State:SUISUN CITY, CA 94585-Total Occupancy:6

Phone #: (701)000-0000

Program Name: RIO VISTA CARE Record ID: 480012AN Legal Name: RIO VISTA CARE, INC. Service Type: NON
Address: 125 SACRAMENTO STREET Resident Capacity: 0
City, State: RIO VISTA, CA 94571 Total Occupancy: 0

Phone #: (707)374-5243

Program Name: THE HOUSE OF ACTS ALCOHOL AND SUBSTANCE ABUSE TREATME! Record ID: 480010CN
Legal Name: THE HOUSE OF ACTS ALCOHOL AND SUBSTANCE ABUSE TREATME! Service Type: RES
Address: 121 CARNATION CIRCLE Resident Capacity: 10
City, State: VALLEJO, CA 94590- Total Occupancy: 10

Phone #: (707)553-1042

As of: 04/06/2005 *Solano County*

Program Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM
Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM
Address: 627 GRANT STREET
City, State: VALLEJO, CA 94590
Record ID: 480010AN
Service Type: RES
Resident Capacity: 10
Total Occupancy: 10

Phone #: (707)553-1042

Program Name: THE HOUSE OF ACTS II Record ID: 480010BN
Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM Service Type: RES

Address: 115 TERI COURT Resident Capacity: 10

City, State: VALLEJO, CA 94589- Total Occupancy: 10

Phone #: (707)643-8316

Program Name: YOUTH AND FAMILY SERVICES OUTPATIENT ALCOHOL AND DRUG
Legal Name: YOUTH AND FAMILY SERVICES, INC.
Address: 1350 HAYES STREET, SUITE A-20
City, State: BENICIA, CA 94510Record ID: 480007FN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)746-5408

Program Name: YOUTH AND FAMILY SERVICES OUTPATIENT ALCOHOL AND DRUG Record ID: 480007EN Legal Name: YOUTH AND FAMILY SERVICES, INC. Service Type: NON Address: 1735 ENTERPRISE DRIVE, BUILDING 3 Resident Capacity: 0 City, State: FAIRFIELD, CA 94533- Total Occupancy: 0

Phone #: (707)427-6640

Program Name: PROJECT AURORA/ADAPT Record ID: 480007DN Legal Name: YOUTH AND FAMILY SERVICES, INC. Service Type: NON
Address: 408 TENNESSEE STREET Resident Capacity: 0
City, State: VALLEJO, CA 94590 Total Occupancy: 0

Phone #: (707)554-2397

Program Name:YOUTH AND FAMILY SERVICES, INC. (OUTPATIENT ALCOHOL AND 1Record ID: 480007GNLegal Name:YOUTH AND FAMILY SERVICES, INC.Service Type: NONAddress:1017 TENNESSEE STREETResident Capacity: 0City, State:VALLEJO, CA 94590-Total Occupancy: 0

Phone #: (701)647-1520

As of: 04/06/2005 *Sonoma County*

Program Name: BOYS FACILITY Record ID: 490011AN Legal Name: 'R' HOUSE Service Type: DSS

Address: 429 SPEERS ROAD Resident Capacity: 0
City, State: SANTA ROSA, CA 95409 Total Occupancy: 0

Phone #: (707)539-2948

Program Name: GIRL'S FACILITY #3 Record ID: 490011FN
Legal Name: 'R' HOUSE Service Type: DSS

Address: 4960 SNARK AVENUE Resident Capacity: 0
City, State: SANTA ROSA, CA 95409- Total Occupancy: 0

Phone #: (707)539-2948

Program Name: GIRLS FACILITY #1 Record ID: 490011CN
Legal Name: 'R' HOUSE Service Type: DSS
Address: 5136 OAK PARK WAY Resident Capacity: 0
City, State: SANTA ROSA, CA 95409 Total Occupancy: 0

Phone #: (707)539-2948

Program Name: GIRLS FACILITY #2 Record ID: 490011DN Legal Name: 'R' HOUSE Service Type: DSS

Address: 5316 SAN LUIS AVENUE Resident Capacity: 0
City, State: SANTA ROSA, CA 95409 Total Occupancy: 0

Phone #: (707)539-2948

Program Name: WINDING CREEK GIRLS' FACILITY
Legal Name: 'R' HOUSE
Address: 152 MIDDLE RINCON ROAD
City, State: SANTA ROSA, CA 95409

Record ID: 490011EN
Service Type: DSS
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)539-2948

Program Name: ANANDA INSTITUTE CHEMICAL DEPENDENCY RECOVERY PROGRA Legal Name: ANANDA INSTITUTE

Address: 401 SOUTH A STREET

City, State: SANTA ROSA, CA 95401
Record ID: 490030AN Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (707)544-4441

Program Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION EARLY INTER' Record ID: 490010EN
Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION Service Type: NON
Address: 3315 AIRWAY DRIVE Resident Capacity: 0
City, State: SANTA ROSA, CA 95403- Total Occupancy: 0

Phone #: (707)523-2242

Program Name: ATHENA HOUSE Record ID: 490010DN
Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION Service Type: RES
Address: 1416 SLATER STREET Resident Capacity: 6
City, State: SANTA ROSA, CA 95404- Total Occupancy: 6

Phone #: (707)526-3150

As of: 04/06/2005 Sonoma County

Program Name: ATHENA HOUSE II Record ID: 490010CN Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION Service Type: RES

Address: 1412 SLATER STREET Resident Capacity: 6
City, State: SANTA ROSA, CA 95404- Total Occupancy: 6

Phone #: (707)566-8715

Program Name: ATHENA HOUSE Record ID: 490010AN
Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION Service Type: RES

Address: 1539 HUMBOLDT STREET Resident Capacity: 15
City, State: SANTA ROSA, CA 95404- Total Occupancy: 16

Phone #: (707)526-3150

Program Name: CAMPOBELLO OUTPATIENT CENTER Record ID: 490002BP Legal Name: CAMPOBELLO CHEMICAL DEPENDENCY RECOVERY CENTER, INC. Service Type: NON Address: 2455 BENNETT VALLEY ROAD, C-III Resident Capacity: 0 City, State: SANTA ROSA, CA 95404- Total Occupancy: 0

Phone #: (707)546-1547

Program Name: CAMPOBELLO CHEMICAL DEPENDENCY RECOVERY CENTER Record ID: 490002AP
Legal Name: CAMPOBELLO CHEMICAL DEPENDENCY RECOVERY CENTER, INC.
Service Type: RES-DETOX

Address: 3250 GUERNEVILLE ROAD Resident Capacity: 25 City, State: SANTA ROSA, CA 95401 Total Occupancy: 25

Phone #: (707)579-4066

Program Name: A STEP UP Record ID: 490031BN Legal Name: COMMUNITY SUPPORT NETWORK Service Type: DSS

Address: 420 EAST COTATI AVENUE Resident Capacity: 0
City, State: COTATI, CA 94931- Total Occupancy: 0

Phone #: (707)795-4336

Program Name: TURNING POINT - ARROWOOD
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 440 ARROWOOD DRIVE
City, State: SANTA ROSA, CA 95407Record ID: 490009RN
Service Type: RES
Resident Capacity: 99
Total Occupancy: 99

Phone #: (707)571-2233

Program Name: TURNING POINT - INDIAN CREEK SOUTH
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 227 INDIAN CREEK
City, State: SANTA ROSA, CA 95407
Record ID: 490009PN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6

Phone #: (707)539-6284

Program Name: DRUG ABUSE ALTERNATIVES CENTER - DRUG COURT
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 2230 PROFESSIONAL DRIVE
City, State: SANTA ROSA, CA 95403Record ID: 490009LN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)571-2233

As of: 04/06/2005 Sonoma County

Program Name: PERINATAL DAY TREATMENT Record ID: 490009EN Legal Name: DRUG ABUSE ALTERNATIVES CENTER Service Type: NON
Address: 2403 PROFESSIONAL DRIVE, SUITE 102 Resident Capacity: 0
City, State: SANTA ROSA, CA 95403- Total Occupancy: 0

Phone #: (707)571-2233

Program Name: BAY AREA RECOVERY SERVICES Record ID: 490009DN Legal Name: DRUG ABUSE ALTERNATIVES CENTER Service Type: NON
Address: 2403 PROFESSIONAL DRIVE, SUITE 101 Resident Capacity: 0
City, State: SANTA ROSA, CA 95403 Total Occupancy: 0

Phone #: (707)571-2233

Program Name: OUTPATIENT TREATMENT PROGRAM
Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 2403 PROFESSIONAL DRIVE, SUITE 101
City, State: SANTA ROSA, CA 95403
Record ID: 490009BN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (707)571-2233

Program Name: TURNING POINT Record ID: 490009AN Legal Name: DRUG ABUSE ALTERNATIVES CENTER Service Type: RES

Address: 920 ACACIA LANE Resident Capacity: 35

City, State: SANTA ROSA, CA 95405 Total Occupancy: 35

Phone #: (707)571-2233

Program Name: CASA TERESA RECOVERY HOME Record ID: 490019BN Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: RES

Address: 778 ROBINSON ROAD Resident Capacity: 6

City, State: SEBASTOPOL, CA 95472- Total Occupancy: 16

Phone #: (707)573-0117

Program Name: CASA CALMECAC Record ID: 490019AN Legal Name: LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES O Service Type: RES
Address: 857 DUTTON AVENUE Resident Capacity: 18
City, State: SANTA ROSA, CA 95407 Total Occupancy: 18

Phone #: (707)573-0117

Program Name: MOUNTAIN VISTA FARM Record ID: 490025AP
Legal Name: NEW VISTAS RECOVERY, INC. Service Type: RES-DETOX

Address: 3020 WARM SPRINGS ROAD Resident Capacity: 30 City, State: GLEN ELLEN, CA 95442- Total Occupancy: 35

Phone #: (707)996-6716

Program Name: SEQUOIA RECOVERY SERVICES

Legal Name: PSYCHSTRATEGIES, INC., A PSYCHOLOGICAL CORPORATION

Address: 1330 NORTH DUTTON AVENUE, SUITE 100

City, State: SANTA ROSA, CA 95401
Record ID: 490028AP

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (707)524-8144

As of: 04/06/2005 Sonoma County

Program Name: ORENDA CENTER-RESIDENTIAL AND DETOXIFICATION Record ID: 490003AN
Legal Name: SONOMA COUNTY DEPARTMENT OF HEALTH SERVICES, ALCOHOL Service Type: RES-DETOX

Address: 1430 NEOTOMAS AVENUE Resident Capacity: 50 City, State: SANTA ROSA, CA 95405- Total Occupancy: 50

Phone #: (707)565-7460

Program Name: ORENDA CENTER NONRESIDENTIAL PROGRAM Record ID: 490003FN

Legal Name: SONOMA COUNTY DEPARTMENT OF HEALTH SERVICES, ALCOHOL Service Type: NON

Address: 1430 NEOTOMAS AVENUE Resident Capacity: 0
City, State: SANTA ROSA, CA 95405- Total Occupancy: 0

Phone #: (707)565-7450

Program Name: UNITY HOUSE Record ID: 490003EN

Legal Name: SONOMA COUNTY DEPARTMENT OF HEALTH SERVICES, ALCOHOL Service Type: RES

Address: 920 WEST 8TH STREET Resident Capacity: 6
City, State: SANTA ROSA, CA 95401 Total Occupancy: 6

Phone #: (707)528-4141

Program Name: RUTH HOUSE Record ID: 490003BN

Legal Name: SONOMA COUNTY DEPARTMENT OF HEALTH SERVICES, ALCOHOL Service Type: RES

Address: 1071 3RD STREET Resident Capacity: 6
City, State: SANTA ROSA, CA 95404-6635 Total Occupancy: 6

Phone #: (707)565-7487

Program Name: ST. ANTHONY FARM Record ID: 490015AN

Legal Name:ST. ANTHONY FOUNDATIONService Type:RESAddress:11207 VALLEY FORD ROADResident Capacity:46City, State:PETALUMA, CA 94952Total Occupancy:46

Phone #: (707)794-7120

Program Name: AZURE ACRES Record ID: 490021AP

Legal Name: THE CAMP RECOVERY CENTERS, L.P. Service Type: RES-DETOX

Address: 2264 GREEN HILL ROAD Resident Capacity: 28
City, State: SEBASTOPOL, CA 95472 Total Occupancy: 28

Phone #: (707)823-3385

Program Name: WOMEN'S RECOVERY SERVICES, A UNIQUE PLACE Record ID: 490004EN

Legal Name:WOMEN'S RECOVERY SERVICES, A UNIQUE PLACEService Type:RESAddress:98, 112, 120, AND 140 HENDLEY STREETResident Capacity:20City, State:SANTA ROSA, CA 95404Total Occupancy:32

Phone #: (707)527-0412

As of: 04/06/2005 Stanislaus County

Program Name: THE LIVING CENTER Record ID: 500013AP
Legal Name: ELAN SENIOR LIVING, INC. Service Type: RES-DETOX

Address: 821 E STREET Resident Capacity: 40 City, State: PATTERSON, CA 95363- Total Occupancy: 40

Phone #: (209)892-3487

Program Name: THE LIVING CENTER OUTPATIENT SERVICES OF TURLOCK Record ID: 500013DP

Legal Name:ELAN SENIOR LIVING, INC.Service Type:NONAddress:2101 GEER ROAD, SUITE 107Resident Capacity:0City, State:TURLOCK, CA 95380-Total Occupancy:0

Phone #: (209)664-9292

Program Name: THE LIVING CENTER Record ID: 500013CP
Legal Name: ELAN SENIOR LIVING, INC. Service Type: NON

Address: 1717 COFFEE ROAD Resident Capacity: 0

Address: 1717 COFFEE ROAD Resident Capacity: 0
City, State: MODESTO, CA 95355- Total Occupancy: 0

Phone #: (209)892-3487

Program Name: THE LIVING CENTER Record ID: 500013BP
Legal Name: ELAN SENIOR LIVING, INC. Service Type: NON

Address: 821 E STREET Resident Capacity: 0
City, State: PATTERSON, CA 95363- Total Occupancy: 0

Phone #: (209)892-3487

Program Name: EMPOWERMENT THERAPY CENTER
Legal Name: EMPOWERMENT THERAPY CENTER
Address: 2028 WEST ORANGEBURG AVENUE
City, State: MODESTO, CA 95350Record ID: 500015AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

City, State: MODESTO, CA 95350-Phone #: (209)577-3899

Program Name: RECOVERY SYSTEMS ASSOCIATES Record ID: 500004BP

Legal Name:GENE RADINOService Type:NONAddress:823 EAST ORANGEBURGResident Capacity:0City, State:MODESTO, CA 95350-Total Occupancy:0

Phone #: (209)527-2046

Program Name: NEW HOPE RECOVERY HOUSE Record ID: 500004AP
Legal Name: GENE RADINO Service Type: RES-DETOX

Address: 823 EAST ORANGEBURG AVENUE Resident Capacity: 40

Address: 823 EAST ORANGEBURG AVENUE Resident Capacity: 40 City, State: MODESTO, CA 95350 Total Occupancy: 40

Phone #: (209)527-9797

Program Name: TEEN RECOVERY CENTER-MODESTO Record ID: 500016AN Legal Name: MENTAL HEALTH SYSTEMS, INC. Service Type: NON Address: 330 MCHENRY AVENUE, SUITE C Resident Capacity: 0

City, State: MODESTO, CA 95354-0561 Total Occupancy: 0

Phone #: (209)541-2157

Record ID: 500012AP

Record ID: 500009HN

Service Type: RES-DETOX

Record ID: 500009CN

Record ID: 500009FN Service Type: NON

Record ID: 500009EN

Service Type: RES-DETOX

Record ID: 500009GN

Record ID: 500011AN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Resident Capacity: 6
Total Occupancy: 6

Total Occupancy: 0

Resident Capacity: 0
Total Occupancy: 0

Resident Capacity: 30

Total Occupancy: 30

As of: 04/06/2005 Stanislaus County

Program Name: OCCUPATIONAL HEALTH SERVICES

Legal Name: MHN SERVICES

Address: 2260 FLOYD AVENUE, SUITE 100 City, State: MODESTO, CA 95355-

Phone #: (209)527-8070

Program Name: NIRVANA DRUG AND ALCOHOL WOMEN OF HOPE

Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM

Address: 1116 1/2 ALICE STREET City, State: MODESTO, CA 95351-

Phone #: (209)524-1829

Program Name: NIRVANA DRUG AND ALCOHOL TREATMENT INSTITUTE

Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM

Address: 948 11TH STREET, SUITE 23

Resident Capacity: 0

Address: 948 11TH STREET, SUITE 23 City, State: MODESTO, CA 95354-

Phone #: (209)579-1151

Program Name: NIRVANA DRUG AND ALCOHOL INSTITUTE

Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM

Address: 1028 RENO STREET City, State: MODESTO, CA 95351-

Phone #: (209)579-1103

Program Name: NIRVANA DRUG & ALCOHOL TREATMENT INSTITUTE

Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM

Address: 1028 RENO STREET City, State: MODESTO, CA 95351-

Phone #: (209)579-1103

Program Name: NIRVANA DRUG AND ALCOHOL WOMEN OF HOPE

Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM Service Type: RES-DETOX

Address: 1116 ALICE STREET Resident Capacity: 6
City, State: MODESTO, CA 95351- Total Occupancy: 6

Phone #: (209)524-1829

Program Name: STANISLAUS RECOVERY CENTER: PERINATAL RESIDENTIAL TREAT

Legal Name: SIERRA VISTA CHILD AND FAMILY SERVICES

Service Type: RES

Address: 1904 RICHLAND AVENUE, PERINATAL TREATMENT BUILDING 1 Resident Capacity: 13 City, State: CERES, CA 95307- Total Occupancy: 39

Phone #: (209)523-4573

Program Name: STANISLAUS RECOVERY CENTER - ADULT NON-RESIDENTIAL Record ID: 500002FN

Legal Name: STANISLAUS COUNTY BEHAVIORAL HEALTH & RECOVERY SERVIC Service Type: NON Address: 1904 RICHLAND AVENUE Resident Capacity: 0

City, State: CERES, CA 95307- Total Occupancy: 0

Phone #: (209)541-2121

As of: 04/06/2005 Stanislaus County

Program Name: EASTSIDE REGIONAL SERVICES Record ID: 500014AN
Legal Name: STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SER\ Service Type: NON

Address: 755 SOUTH YOSEMITE BOULEVARD, SUITE 106 Resident Capacity: 0
City, State: OAKDALE, CA 95361- Total Occupancy: 0

Phone #: (209)847-5927

Program Name: WEST MODESTO REGIONAL SERVICES Record ID: 500014EN

Legal Name: STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERV Service Type: NON

Address: 1100 KANSAS AVENUE Resident Capacity: 0
City, State: MODESTO, CA 95351- Total Occupancy: 0

Phone #: (209)558-7475

Program Name: CERES REGIONAL SERVICES Record ID: 500014DN

Legal Name: STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERV Service Type: NON

Address: 2760 THIRD STREET Resident Capacity: 0
City, State: CERES, CA 95307- Total Occupancy: 0

Phone #: (209)541-2474

Program Name: TURLOCK REGIONAL SERVICES Record ID: 500014BN

Legal Name: STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERV Service Type: NON

Address: 2101 GEER ROAD, SUITE 120 Resident Capacity: 0
City, State: TURLOCK, CA 95380- Total Occupancy: 0

Phone #: (209)664-8044

Program Name: STANISLAUS RECOVERY CENTER Record ID: 500002EN

Legal Name: STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERV Service Type: RES-DETOX

Address: 1904 RICHLAND AVENUE, ADULT TREATMENT BUILDING
City, State: CERES, CA 95307Total Occupancy: 72

Phone #: (209)541-2912

Program Name: PATTERSON REGIONAL SERVICES Record ID: 500014CN

Legal Name: STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERV Service Type: NON Address: 122 4TH STREET Resident Capacity: 0
City, State: PATTERSON, CA 95363- Total Occupancy: 0

Phone #: (209)892-8787

Sutter County As of: 04/06/2005

Program Name: FIRST STEPS PERINATAL DAY TREATMENT PROGRAM

Legal Name: SUTTER-YUBA MENTAL HEALTH SERVICES

Address: 1251 EAST ONSTOTT ROAD City, State: YUBA CITY, CA 95991-

Phone #: (530)822-7263

Program Name: OPTIONS FOR CHANGE SUBSTANCE ABUSE PROGRAM

Legal Name: SUTTER-YUBA MENTAL HEALTH SERVICES

Address: 1965 LIVE OAK BOULEVARD City, State: YUBA CITY, CA 95992-

Phone #: (530)822-7200

Record ID: 510002CN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Record ID: 510002BN

Service Type: NON Resident Capacity: 0

Total Occupancy: 0

As of: 04/06/2005 **Tehama County**

Program Name: BONDAGE BREAKER RECOVERY SERVICE Record ID: 520003AN Legal Name: BONDAGE BREAKER RECOVERY SERVICE Service Type: RES

Address: 224 ASH STREET Resident Capacity: 8

City, State: RED BLUFF, CA 96080-3804 Total Occupancy: 8

Phone #: (530)529-0634

Program Name: TEHAMA COUNTY HEALTH AGENCY DRUG AND ALCOHOL DIVISION Record ID: 520002BN Legal Name: TEHAMA COUNTY HEALTH AGENCY Service Type: NON

Address: 1600 SOLANO AVENUE, SUITE D Resident Capacity: 0
City, State: CORNING, CA 96021- Total Occupancy: 0

Phone #: (530)824-4890

Program Name: TEHAMA COUNTY HEALTH AGENCY DRUG AND ALCOHOL DIVISION Record ID: 520002CN Legal Name: TEHAMA COUNTY HEALTH AGENCY Service Type: NON Address: 9340 SAN BENITO AVENUE Resident Capacity: 0 City, State: GERBER, CA 96035- Total Occupancy: 0

Phone #: (530)385-2042

Program Name: TEHAMA COUNTY HEALTH AGENCY DRUG AND ALCOHOL DIVISIO Record ID: 520002AN Legal Name: TEHAMA COUNTY HEALTH AGENCY Service Type: NON Address: 447 WALNUT STREET Resident Capacity: 0 City, State: RED BLUFF, CA 96080- Total Occupancy: 0

Phone #: (530)527-7893

As of: 04/06/2005

Program Name: TRINITY COUNTY ALCOHOL AND OTHER DRUG SERVICES

Legal Name: TRINITY COUNTY ALCOHOL AND OTHER DRUG SERVICES

Address: 49 AIRPORT ROAD

City, State: WEAVERVILLE, CA 96093-

Phone #: (530)623-1820

Record ID: 530001AN Service Type: NON Resident Capacity: 0

Total Occupancy: 0

As of: 04/06/2005 *Tulare County*

Program Name: A SOLUTION THRU TREATMENT, EDUCATION AND PREVENTION (A. Record ID: 540027CN Legal Name: A SOLUTION THRU TREATMENT, EDUCATION AND PREVENTION, IN Service Type: NON Address: 213 NORTH WEST STREET Resident Capacity: 0

City, State: VISALIA, CA 93291- Total Occupancy: 0

Phone #: (559)564-5212

Program Name: A SOLUTION THRU TREATMENT, EDUCATION AND PREVENTION (A. Record ID: 540027BN

Legal Name: A SOLUTION THRU TREATMENT, EDUCATION AND PREVENTION, IN Service Type: NON

Address: 168 NORTH VALENCIA Resident Capacity: 0
City, State: WOODLAKE, CA 93286- Total Occupancy: 0

Phone #: (559)564-5212

Program Name: ADDICTION CENTER FOR TEENAGERS Record ID: 540006AN

Legal Name: ADDICTION CENTER FOR TEENAGERS

Address: 23393 ROAD 68

City, State: TULARE, CA 93274

Service Type: DSS

Resident Capacity: 0

Total Occupancy: 0

Phone #: (559)688-4385

Program Name: ALTERNATIVE SERVICES Record ID: 540024DP

Legal Name: ALTERNATIVE SERVICES, INC.

Address: 2223 NORTH SHIRK ROAD, SUITE A

City, State: VISALIA, CA 93291
Total Occupancy: 0

Phone #: (559)651-8090

Program Name: ALTERNATIVE SERVICES Record ID: 540024EP

Legal Name:ALTERNATIVE SERVICES, INC.Service Type:NONAddress:213 EAST KERN STREET, SUITE BResident Capacity:0City, State:TULARE, CA 93274-Total Occupancy:0

Phone #: (559)685-8283

Program Name: ALTERNATIVE SERVICES Record ID: 540024AP

Legal Name:ALTERNATIVE SERVICES, INC.Service Type:NONAddress:215 NORTH D STREETResident Capacity:0City, State:PORTERVILLE, CA 93257-Total Occupancy:0

Phone #: (559)783-2402

Program Name: COMMUNITY ALCOHOL AND DRUG REHABILITATION EFFORT C.A.D Record ID: 540024BN

Legal Name: COMMUNITY ALCOHOL AND DRUG REHABILITATION EFFORT, INC. Service Type: NON Address: 2223 NORTH SHIRK ROAD, SUITE B Resident Capacity: 0
City, State: VISALIA, CA 93291- Total Occupancy: 0

Phone #: (559)651-8090

Program Name: COMMUNITY ALCOHOL AND DRUG REHABILITATION EFFORT C.A.D Record ID: 540024CN

Legal Name: COMMUNITY ALCOHOL AND DRUG REHABILITATION EFFORT, INC. Service Type: NON Address: 213 EAST KERN STREET, SUITE A Resident Capacity: 0
City, State: TULARE, CA 93274- Total Occupancy: 0

Phone #: (559)685-8283

Tulare County As of: 04/06/2005

Program Name: COMMUNITY ALCOHOL AND DRUG REHABILITATION EFFORT C.A.D. Record ID: 540024FN Legal Name: COMMUNITY ALCOHOL AND DRUG REHABILITATION EFFORT, INC. Service Type: NON Resident Capacity: 0 Address: 215 NORTH "D" STREET Total Occupancy: 0 City, State: PORTERVILLE, CA 93257-

Phone #: (559)783-2320

Program Name: COURAGE TO CHANGE Record ID: 540014AN Legal Name: COURAGE TO CHANGE Service Type: RES Resident Capacity: 0 Address: 1230 ANDERSON ROAD Total Occupancy: 0 City, State: EXETER, CA 93221

Phone #: (559)594-4855

Program Name: SRS RECOVERY SERVICES Record ID: 540022BP Service Type: NON Legal Name: GREG JOHNSON Resident Capacity: 0 Address: 515 WEST MURRAY AVENUE, SUITES B AND C City, State: VISALIA, CA 93291-Total Occupancy: 0

Phone #: (559)636-2091

Program Name: SRS RECOVERY SERVICES Record ID: 540022AP Service Type: NON Legal Name: GREG JOHNSON Address: 130 EAST MILL AVENUE Resident Capacity: 0 City, State: PORTERVILLE, CA 93257-Total Occupancy: 0

Phone #: (559)789-9881

Record ID: 540030FN Program Name: RETHERFORD HOUSE Service Type: NON Legal Name: KARIS HOUSE, INC. Resident Capacity: 0 Address: 1931 CRENSHAW STREET City, State: VISALIA, CA 93277-Total Occupancy: 0

Phone #: (559)735-0712

Record ID: 540030BN Program Name: DANI'S HOUSE Service Type: RES Legal Name: KARIS HOUSE, INC. Address: 808 NORTH CONYER STREET Resident Capacity: 0 City, State: VISALIA, CA 93277-Total Occupancy: 0

Phone #: (559)735-0712

Record ID: 540030CN Program Name: TIFFANY HOUSE Legal Name: KARIS HOUSE, INC. Service Type: RES Address: 35095 ROAD 132 Resident Capacity: 0 Total Occupancy: 0 City, State: VISALIA, CA 93292-

Phone #: (559)735-0712

Record ID: 540030AN Program Name: JARVIS HOUSE Service Type: RES Legal Name: KARIS HOUSE, INC. Address: 4125 WEST CROWLEY AVENUE Resident Capacity: 0 Total Occupancy: 0

City, State: VISALIA, CA 93291-

Phone #: (559)735-0712

As of: 04/06/2005 *Tulare County*

Program Name: KARIS HOUSE Record ID: 540030EN Legal Name: KARIS HOUSE, INC. Service Type: NON
Address: 714 NORTH WILLIS STREET Resident Capacity: 0
City, State: VISALIA, CA 93291- Total Occupancy: 0

Phone #: (559)735-0712

Program Name: TONY'S HOUSE Record ID: 540030DN
Legal Name: KARIS HOUSE, INC. Service Type: RES

Address: 625 EAST SUNNYVIEW COURT Resident Capacity: 0
City, State: VISALIA, CA 93291- Total Occupancy: 0

Phone #: (559)735-0712

Program Name: KAWEAH DELTA FAMILY RECOVERY CENTER
Legal Name: KAWEAH DELTA HEALTH CARE DISTRICT
Address: 1100 SOUTH AKERS ROAD
City, State: VISALIA, CA 93277
Record ID: 540025AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)624-3381

Program Name: NUEVO COMIENZO Record ID: 540026AN Legal Name: LATINO COMMISION ON ALCOHOL AND DRUG ABUSE SERVICES OF Service Type: NON Address: 40448 MUELLER ROAD Resident Capacity: 0
City, State: CULTER, CA 93615- Total Occupancy: 0

Phone #: (559)528-4246

Program Name: THE PAAR CENTER SOUTHWEST
Legal Name: PORTERVILLE HALFWAY HOUSE
Address: 253 WEST BELLEVIEW AVENUE
City, State: PORTERVILLE, CA 93257Record ID: 540001GN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)781-0107

Program Name: THE PAAR CENTER Record ID: 540001HN
Legal Name: PORTERVILLE HALFWAY HOUSE Service Type: RES-DETOX

Address: 218, APTS B AND C WEST BELLEVIEW AVENUE AND 509 NORTH Resident Capacity: 69 City, State: PORTERVILLE, CA 93257- Total Occupancy: 69

Phone #: (559)781-0107

Program Name: PAAR CENTER WEST
Legal Name: PORTERVILLE HALFWAY HOUSE
Address: 182 WEST BELLEVIEW AVENUE
City, State: PORTERVILLE, CA 93257
Record ID: 540001CN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12

Phone #: (559)781-0107

Program Name: THE PAAR CENTER

Legal Name: PORTERVILLE HALFWAY HOUSE

Address: 509 NORTH EL GRANITO STREET

City, State: PORTERVILLE, CA 93257
Total Occupancy: 0

Phone #: (559)781-0107

As of: 04/06/2005 *Tulare County*

Program Name: RECOVERY RESOURCES Record ID: 540020AP Legal Name: RICK AND JERRI THOMPSON, D.B.A., RECOVERY RESOURCES Service Type: NON Address: 307 WEST MURRAY STREET Resident Capacity: 0

Total Occupancy: 0

Phone #: (559)625-8176

City, State: VISALIA, CA 93291-

Program Name: MOTHERING HEIGHTS Record ID: 540002EN
Legal Name: TULARE COUNTY ALCOHOLISM COUNCIL Service Type: RES

Address: 705 SOUTH COURT STREET Resident Capacity: 10
City, State: VISALIA, CA 93277- Total Occupancy: 20

Phone #: (559)625-2995

Program Name: NEW HEIGHTS Record ID: 540002FN

Legal Name: TULARE COUNTY ALCOHOLISM COUNCIL

Address: 1425-B EAST WALNUT

City, State: VISALIA, CA 93277
Total Occupancy: 0

Phone #: (559)625-2995

Program Name: PINE RECOVERY CENTER Record ID: 540002AN
Legal Name: TULARE COUNTY ALCOHOLISM COUNCIL Service Type: RES-DETOX

Address: 120 WEST SCHOOL STREET Resident Capacity: 27
City, State: VISALIA, CA 93291 Total Occupancy: 27

Phone #: (209)625-2995

Program Name: NEW VISIONS FOR WOMEN Record ID: 540002BN
Legal Name: TULARE COUNTY ALCOHOLISM COUNCIL Service Type: RES-DETOX

Address: 1425-A EAST WALNUT AVENUE Resident Capacity: 17
City, State: VISALIA, CA 93277-6432 Total Occupancy: 17

Phone #: (209)625-4072

Program Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMII Record ID: 540002IN Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY Service Type: NON Address: 1055 WEST HENDERSON, SUITE 4 Resident Capacity: 0 City, State: PORTERVILLE, CA 93257- Total Occupancy: 0

Phone #: (559)737-4660

Program Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMII Record ID: 540002JN Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY Service Type: NON Address: 1066 NORTH ALTA Resident Capacity: 0

City, State: DINUBA, CA 93618- Total Occupancy: 0

City, State: DINUBA, CA 93618-Phone #: (559)737-4660

Program Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMII Record ID: 540002HN

Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY
Address: 2325 WEST MAIN
City, State: VISALIA, CA 93291Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (559)737-4660

As of: 04/06/2005 *Tulare County*

Program Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMII Record ID: 540002GN Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY Service Type: NON Address: 1062 SOUTH K STREET, SECOND FLOOR Resident Capacity: 0

City, State: TULARE, CA 93274
Total Occupancy: 0

Phone #: (559)737-4660

Program Name: ANGELA'S HOUSE Record ID: 540009CN

Legal Name: TULARE COUNTY HISPANIC COMMISSION ON ALCOHOL & DRUG AF Service Type: RES

Address: 1300 SOUTH CROWE STREET Resident Capacity: 8
City, State: VISALIA, CA 93277- Total Occupancy: 28

Phone #: (559)734-6042

Program Name: EL PRIMER PASO Record ID: 540009BN

Legal Name: TULARE COUNTY HISPANIC COMMISSION ON ALCOHOL & DRUG AF Service Type: RES Address: 1328 AND 1350 BUILDING A, SOUTH CROWE STREET Resident Capacity: 24 City, State: VISALIA, CA 93277 Total Occupancy: 28

Phone #: (559)734-6042

Program Name: TURNING POINT VISALIA RE-ENTRY CENTER Record ID: 540005DN Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC. Service Type: RES

Address: 1845 SOUTH COURT STREET Resident Capacity: 20 City, State: VISALIA, CA 93277- Total Occupancy: 35

Phone #: (559)732-5550

Program Name: TURNING POINT YOUTH SERVICES Record ID: 540005BN

Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.

Address: 220 NORTH LOCUST STREET

City, State: VISALIA, CA 93291

Total Occupancy: 0

Phone #: (559)627-1385

As of: 04/06/2005

Program Name: THE RANCH

Legal Name: MAYNORD'S CHEMICAL DEPENDENCY RECOVERY CENTER

Address: 19325 CHEROKEE ROAD City, State: TUOLUMNE, CA 95379

Phone #: (209)928-3737

Record ID: 550001AP Service Type: RES-DETOX

Resident Capacity: 30 Total Occupancy: 30

As of: 04/06/2005 *Ventura County*

Program Name: ACTION FAMILY COUNSELING CENTERS - SIMI VALLEY
Legal Name: ACTION FAMILY COUNSELING, INC.

Address: 1736 ERRINGER ROAD, SUITE 100
City, State: SIMI VALLEY, CA 93065
Record ID: 560026AP
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (800)367-8336

Program Name: ACTION FAMILY COUNSELING CENTERS - OXNARD Record ID: 560026BP

Legal Name: ACTION FAMILY COUNSELING, INC.

Address: 2640 SADDLE AVENUE

City, State: OXNARD, CA 93030
Total Occupancy: 0

Phone #: (805)278-8992

Program Name: SANTA PAULA - THE FARM Record ID: 560026CP

Legal Name: ACTION FAMILY COUNSELING, INC.

Address: 15005 FAULKNER ROAD

City, State: SANTA PAULA, CA 93060
Total Occupancy: 0

Phone #: (805)933-1219

Program Name: ALTERNATIVE ACTION PROGRAMS Record ID: 560028AP

Legal Name: DENNIS M. GIROUX AND ASSOCIATES, INC.

Address: 2575 WAGON WHEEL ROAD

City, State: OXNARD, CA 93030
Total Occupancy: 0

Phone #: (805)988-1112

Program Name: SIMI OAKS ALCOHOL AND DRUG PROGRAM Record ID: 560031AP

Legal Name:ERNEST WILSON FEDERER, III, PH.D.Service Type:NONAddress:2345 ERRINGER ROAD, SUITE 106Resident Capacity:0City, State:SIMI VALLEY, CA 93065-Total Occupancy:0

Phone #: (805)581-9330

Program Name: GENESIS PROGRAMS, INC.

Legal Name: GENESIS PROGRAMS, INC.

Service Type: NON

Address: 1650 PALMA PRIVE SUITE 208

Address: 1650 PALMA DRIVE, SUITE 208 Resident Capacity: 0
City, State: VENTURA, CA 93003- Total Occupancy: 0

Phone #: (805)650-3094

Program Name: GENESIS PROGRAMS, INC.

Legal Name: GENESIS PROGRAMS, INC.

Record ID: 560032BP

Service Type: NON

Legal Name:GENESIS PROGRAMS, INC.Service Type:NONAddress:145 HODENCAMP ROAD, SUITE 207Resident Capacity:0City, State:THOUSAND OAKS, CA 91360-Total Occupancy:0

Phone #: (805)497-6169

Program Name: KHEPERA HOUSE Record ID: 560004JN

Legal Name:KHEPERA HOUSEService Type:RESAddress:125-C WEST HARRISON STREETResident Capacity:4City, State:VENTURA, CA 93001-Total Occupancy:4

Phone #: (805)653-2596

As of: 04/06/2005 **Ventura County**

Program Name: KHEPERA HOUSE
Legal Name: KHEPERA HOUSE
Address: 105 WEST HARRISON STREET
City, State: VENTURA, CA 93001
Phone #: (805)653-2596

Record ID: 560004CN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Program Name: KHEPERA HOUSE Record ID: 560004AN Legal Name: KHEPERA HOUSE Service Type: RES-DETOX

Address: 105 WEST HARRISON STREET Resident Capacity: 15 City, State: VENTURA, CA 93001 Total Occupancy: 15

Phone #: (805)653-2596

Program Name: KHEPERA HOUSE Record ID: 560004FN
Legal Name: KHEPERA HOUSE Service Type: RES

Address: 277 B WEST HARRISON AVENUE Resident Capacity: 4

Address: 277 B WEST HARRISON AVENUE Resident Capacity: 4
City, State: VENTURA, CA 93001- Total Occupancy: 4

Phone #: (805)648-9762

Program Name: KHEPERA HOUSE Record ID: 560004EN
Legal Name: KHEPERA HOUSE Service Type: RES
Address: 277 A WEST HARRISON AVENUE Resident Capacity: 6

Address: 277 A WEST HARRISON AVENUE Resident Capacity: 6
City, State: VENTURA, CA 93001- Total Occupancy: 6

Phone #: (805)648-9762

Program Name: KHEPERA HOUSE Record ID: 560004DN Legal Name: KHEPERA HOUSE Service Type: RES

Address: 108 WEST HARRISON AVENUE Resident Capacity: 6

City, State: VENTURA, CA 93001- Total Occupancy: 6

Phone #: (805)653-2596

Program Name: KHEPERA HOUSE Record ID: 560004LN Legal Name: KHEPERA HOUSE Service Type: RES

Address: 125-B WEST HARRISON STREET Resident Capacity: 6

City, State: VENTURA, CA 93001- Total Occupancy: 6

Phone #: (805)653-2596

Program Name: KHEPERA HOUSE Record ID: 560004KN Legal Name: KHEPERA HOUSE Service Type: RES

Address: 125-A WEST HARRISON STREET Resident Capacity: 6

City, State: VENTURA, CA 93001- Total Occupancy: 6

Phone #: (805)653-2596

Program Name: KHEPERA HOUSE Record ID: 560004MN Legal Name: KHEPERA HOUSE Service Type: RES

Address: 125-D WEST HARRISON STREET

City, State: VENTURA, CA 93001
Resident Capacity: 4

Total Occupancy: 4

Phone #: (805)653-2596

As of: 04/06/2005 *Ventura County*

Program Name: MIRACLES FOR MOMS AND MIRACLE RECOVERY DAY TREATMENT Record ID: 560007HN Legal Name: MIRACLE HOUSE, INC. Service Type: NON Address: 121 DAVIS STREET Resident Capacity: 0

City, State: SANTA PAULA, CA 93060Total Occupancy: 0

Phone #: (805)525-7789

Program Name: MIRACLE HOUSE Record ID: 560007CN Legal Name: MIRACLE HOUSE, INC. Service Type: RES

Address: 92 SOUTH ANACAPA STREET Resident Capacity: 4

City, State: VENTURA, CA 93001 Total Occupancy: 4

Phone #: (805)648-4783

Program Name: MIRACLES FOR MOMS AND MIRACLE RECOVERY DAY TREATMENT
Legal Name: MIRACLE HOUSE, INC.
Record ID: 560007IN
Service Type: NON

Address: 1056 META STREET, SUITE 3 Resident Capacity: 0
City, State: VENTURA, CA 93001- Total Occupancy: 0

Phone #: (805)653-6859

Program Name:MIRACLE HOUSERecord ID:560007ANLegal Name:MIRACLE HOUSE, INC.Service Type:RESAddress:94 SOUTH ANACAPA STREETResident Capacity:6

City, State: VENTURA, CA 93001 Total Occupancy: 6

Phone #: (805)648-4783

Program Name:PACIFIC WEST MULTI-SERVICESRecord ID:560030APLegal Name:NABORS, BARBARAService Type:NONAddress:3201 SAMUEL AVENUEResident Capacity:0City, State:OXNARD, CA 93033-Total Occupancy:0

Phone #: (805)377-4301

Program Name: PDAP OF VENTURA COUNTY, INC.

Legal Name: PDAP OF VENTURA COUNTY, INCORPORATED

Address: 450 ROSEWOOD AVENUE, SUITES 215 AND 217

City, State: CAMARILLO, CA 93010-5914

Record ID: 560015BN

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (805)482-1265

Program Name: PDAP OF VENTURA COUNTY, INC.

Legal Name: PDAP OF VENTURA COUNTY, INCORPORATED

Record ID: 560015CN

Service Type: NON

Address: 940 EAST MAIN STREET Resident Capacity: 0
City, State: SANTA PAULA, CA 93060- Total Occupancy: 0

Phone #: (805)525-6616

Program Name: PDAP OF VENTURA COUNTY, INCORPORATED

Legal Name: PDAP OF VENTURA COUNTY, INCORPORATED

Service Type: NON

Address: 196 NORTH ASHWOOD AVENUE Resident Capacity: 0
City, State: VENTURA, CA 93003- Total Occupancy: 0

Phone #: (805)482-1265

As of: 04/06/2005 **Ventura County**

Program Name: PDAP OF VENTURA COUNTY, INCORPORATED
Legal Name: PDAP OF VENTURA COUNTY, INCORPORATED
Address: 1029 EAST SANTA PAULA STREET
City, State: SANTA PAULA, CA 93060Record ID: 560015EN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (805)482-1265

Program Name: PDAP OF VENTURA COUNTY, INCORPORATED
Legal Name: PDAP OF VENTURA COUNTY, INCORPORATED
Address: 280 CASEY ROAD
City, State: MOORPARK, CA 93021Record ID: 560015DN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (805)482-1265

Program Name: PDAP OF VENTURA COUNTY, INCORPORATED
Legal Name: PDAP OF VENTURA COUNTY, INCORPORATED
Address: 1048 WEST VENTURA STREET
City, State: FILLMORE, CA 93015Record ID: 560015GN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (805)482-1265

Program Name: PROTOTYPES WOMEN'S CENTER - VENTURA Record ID: 560019BN Legal Name: PROTOTYPES, A CENTER FOR INNOVATION IN HEALTH, MENTAL HE Service Type: RES

Address: 152 NORTH DOS CAMINOS AVENUE Resident Capacity: 6

City, State: VENTURA, CA 93003 Total Occupancy: 18

Phone #: (805)641-2958

Program Name: PROTOTYPES WOMEN'S CENTER - VENTURA Record ID: 560019CN Legal Name: PROTOTYPES, A CENTER FOR INNOVATION IN HEALTH, MENTAL HI Service Type: RES Address: 2150 N. VICTORIA AVENUE Resident Capacity: 30 City, State: OXNARD, CA 93036- Total Occupancy: 60

Phone #: (805)382-6296

Program Name: RAINBOW RECOVERY CENTERS - OXNARD
Legal Name: RAINBOW HOUSE
Address: 1826 EAST CHANNEL ISLANDS BOULEVARD
City, State: OXNARD, CA 93033
Record ID: 560006AN
Service Type: RES
Total Occupancy: 15

Phone #: (805)487-4663

Program Name: INTERVENTION INSTITUTE Record ID: 560027AP
Legal Name: SANDERS, LAURIE Service Type: NON
Address: 1125-B BUSINESS CENTER CIRCLE Resident Capacity: 0
City, State: THOUSAND OAKS, CA 91320- Total Occupancy: 0

Phone #: (805)379-3611

Program Name: SANTA CLARA VALLEY ALCOHOLISM SERVICE UNITED
Legal Name: SANTA CLARA VALLEY ALCOHOLISM SERVICE UNITED
Address: 951 EAST MAIN STREET
City, State: SANTA PAULA, CA 93060
Record ID: 560002AN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (805)525-9392

As of: 04/06/2005 *Ventura County*

Program Name: JOSHUA HOUSE
Legal Name: SANTA CLARA VALLEY ALCOHOLISM SERVICE UNITED
Address: 404 EAST MAIN STREET
City, State: SANTA PAULA, CA 93060Record ID: 560002FN
Service Type: RES
Resident Capacity: 15
Total Occupancy: 16

Phone #: (805)525-9392

Program Name: SANTA CLARA VALLEY ALCOHOLISM SERVICE UNITED
Legal Name: SANTA CLARA VALLEY ALCOHOLISM SERVICE UNITED
Address: 355 CENTRAL AVENUE
City, State: FILLMORE, CA 93015Record ID: 560002EN
Service Type: NON
Resident Capacity: 0
Total Occupancy: 0

Phone #: (805)524-5170

Program Name: CASA UN PASO ADELANTE (ONE STEP FORWARD) Record ID: 560002CN Legal Name: SERVICES UNITED, INC. Service Type: RES

Address: 222 SOUTH EIGHTH STREET Resident Capacity: 10

City, State: SANTA PAULA, CA 93060 Total Occupancy: 10

Phone #: (805)525-8089

Program Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL Record ID: 560003AN Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH ALCOHOL & DRUG PROG Service Type: NON Address: 4322 EILEEN STREET Resident Capacity: 0
City, State: SIMI VALLEY, CA 93063 Total Occupancy: 0

Phone #: (805)584-4878

Program Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL Record ID: 560003BN Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH ALCOHOL & DRUG PROG Service Type: NON Address: 24 E. MAIN STREET Resident Capacity: 0

City, State: VENTURA, CA 93001 Total Occupancy: 0

Phone #: (805)652-7823

Program Name: OXNARD CENTER Record ID: 560003CN Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT, ALCOHOI Service Type: NON Address: 1911 WILLIAMS DRIVE Resident Capacity: 0
City, State: OXNARD, CA 93036- Total Occupancy: 0

Phone #: (805)385-1885

Program Name: A NEW START FOR MOMS Record ID: 560003DN

Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT, ALCOHOI Service Type: NON Address: 1911 WILLIAMS DRIVE Resident Capacity: 0
City, State: OXNARD, CA 93036- Total Occupancy: 0

Phone #: (805)385-4114

Program Name: CASA LATINA RESIDENTIAL RECOVERY HOME Record ID: 560013CN

Legal Name: VENTURA COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRU Service Type: RES Address: 1430 JUNEWOOD WAY AND 1431 IVYWOOD DRIVE Resident Capacity: 23 City, State: OXNARD, CA 93030 Total Occupancy: 35

Phone #: (805)988-1560

As of: 04/06/2005 Ventura County

Program Name: COMMUNITY RECOVERY CENTER/NEW HOPE CHURCH FACILITY
Legal Name: VENTURA RECOVERY CENTER, INC.
Record ID: 560010BP
Service Type: NON

Address: 880 HAMPSHIRE ROAD Resident Capacity: 0
City, State: WESTLAKE VILLAGE, CA 91361- Total Occupancy: 0

Phone #: (805)499-8383

Program Name: COMMUNITY RECOVERY CENTER Record ID: 560010AP Legal Name: VENTURA RECOVERY CENTER, INC. Service Type: RES

Address: 166 SIESTA Resident Capacity: 10
City, State: THOUSAND OAKS, CA 91360 Total Occupancy: 10

Phone #: (805)499-8383

As of: 04/06/2005 **Yolo County**

Program Name:CACHE CREEK LODGERecord ID:570004BNLegal Name:CACHE CREEK LODGE, INC.Service Type:RESAddress:435 ASPEN STREETResident Capacity:30City, State:WOODLAND, CA 95695Total Occupancy:30

Phone #: (530)662-5727

Program Name: CACHE CREEK LODGE Record ID: 570004CN
Legal Name: CACHE CREEK LODGE, INC. Service Type: NON

Address: 435 ASPEN STREET Resident Capacity: 0

City, State: WOODLAND, CA 95695- Total Occupancy: 0

Phone #: (530)662-5727

Program Name: YOLO COUNTY DRUG AND ALCOHOL EDUCATION Record ID: 570001CN
Legal Name: COUNTY OF YOLO ALCOHOL, DRUG AND MENTAL HEALTH SERVIC Service Type: NON
Address: 500 JEFFERSON BOULEVARD, #150 Resident Capacity: 0
City, State: WEST SACRAMENTO, CA 95605- Total Occupancy: 0

Phone #: (916)375-6370

Program Name: YOLO COUNTY DRUG AND ALCOHOL EDUCATION Record ID: 570001DN Legal Name: COUNTY OF YOLO ALCOHOL, DRUG AND MENTAL HEALTH SERVIC Service Type: NON Address: 178 WEST BEAMER STREET Resident Capacity: 0
City, State: WOODLAND, CA 95695- Total Occupancy: 0

Phone #: (530)666-8658

Program Name: BEAMER STREET RESIDENTIAL TREATMENT & DETOX CENTER Record ID: 570001BN Legal Name: COUNTY OF YOLO DEPARTMENT OF ALCOHOL, DRUG AND MENTAI Service Type: RES-DETOX

Address: 178 WEST BEAMER STREET Resident Capacity: 14
City, State: WOODLAND, CA 95695 Total Occupancy: 14

Phone #: (530)666-8663

Program Name: WALTER'S HOUSE Record ID: 570008AN Legal Name: YOLO WAYFARER RECOVERY CENTER CHRISTIAN MISSION Service Type: RES
Address: 285 4TH STREET Resident Capacity: 30
City, State: WOODLAND, CA 95695- Total Occupancy: 44

Phone #: (530)661-1218

As of: 04/06/2005 **Yuba County**

Program Name: FOR OUR RECOVERING (F.O.R.) FAMILIES

Legal Name: COUNTY OF YUBA COMMUNITY HEALTH SERVICES

Record ID: 580002AN

Service Type: NON

Address: 6000 LINDHURST AVENUE, SUITE 700-B Resident Capacity: 0
City, State: MARYSVILLE, CA 95901- Total Occupancy: 0

Phone #: (530)749-6798

Program Name: PATHWAYS I Record ID: 580001BN

Legal Name: MIDVALLEY RECOVERY FACILITIES, INCORPORATED Service Type: RES-DETOX

Address: 2 - 9TH STREET Resident Capacity: 23

City, State: MARYSVILLE, CA 95901 Total Occupancy: 23

Phone #: (530)674-4075

Program Name: PATHWAYS III Record ID: 580001DN

Legal Name: MIDVALLEY RECOVERY FACILITIES, INCORPORATED

Address: 605 FOURTH STREET

City, State: MARYSVILLE, CA 95901

Service Type: NON

Resident Capacity: 0

Total Occupancy: 0

Phone #: (530)742-6670

Program Name: NORTHERN CALIFORNIA TREATMENT SERVICES, G HOUSE Record ID: 580003CN

Legal Name: NORTHERN CALIFORNIA TREATMENT SERVICES, INC

Address: 5655 ARBOGA ROAD, UNIT G

City, State: MARYSVILLE, CA 95901
Total Occupancy: 6

Phone #: (530)743-3304

Program Name: NORTHERN CALIFORNIA TREATMENT SERVICES, INC Record ID: 580003AN

Legal Name: NORTHERN CALIFORNIA TREATMENT SERVICES, INC.

Address: 5653 ARBOGA ROAD, UNIT A

City, State: MARYSVILLE, CA 95901
Total Occupancy: 6

Phone #: (530)743-3304

Program Name: NORTHERN CALIFORNIA TREATMENT SERVICES Record ID: 580003BN

Legal Name: NORTHERN CALIFORNIA TREATMENT SERVICES, INC.

Address: 5655 ARBOGA ROAD, UNIT C
City, State: MARYSVILLE, CA 95901
Total Occupancy: 6

Phone #: (530)743-3304

Program Name: NORTHERN CALIFORNIA TREATMENT SERVICES, INC. Record ID: 580003DN

Legal Name: NORTHERN CALIFORNIA TREATMENT SERVICES, INC.

Address: 5023 OLIVEHURST AVENUE

City, State: OLIVEHURST, CA 95961
Total Occupancy: 0

Phone #: (530)743-3304